

AFTER RECORDING RETURN TO:
GODEEDS, INC.
ATTN: LEGALZOOM DEPT.
8940 MAIN STREET
CLARENCE, NY 14031
File No. 512928871-38436996

MAIL TAX STATEMENTS TO:
MICHAEL P. SULLIVAN AND CHRISTY M. SULLIVAN
200 BEVERLY ROAD
STATELINE, NV 89449-6960

Tax ID No.: 1319-19-410-009

QUIT CLAIM DEED

THIS DEED made and entered into on this 31 day of March, 2015, by and between **MICHAEL P. SULLIVAN AND CHRISTY M. SULLIVAN, WHO ACQUIRED TITLE AS DR. MICHAEL SULLIVAN AND CHRISTY SULLIVAN, HUSBAND AND WIFE, AS JOINT TENANTS**, a mailing address of 200 BEVERLY ROAD, STATELINE, NV 89449-6960, hereinafter referred to as Grantor(s) and **MICHAEL P. SULLIVAN AND CHRISTY M. SULLIVAN, AS TRUSTEES OF THE MICHAEL PATRICK SULLIVAN AND CHRISTY MARIE SULLIVAN LIVING TRUST, DATED 3/24/2015**, a mailing address of 200 BEVERLY ROAD, STATELINE, NV 89449-6960, hereinafter referred to as Grantee(s).

WITNESSETH: That the said Grantor(s), for and in consideration of the sum of ONE and NO/100 (\$1.00) DOLLAR, cash in hand paid, the receipt of which is hereby acknowledged, have this day remise, release, quitclaim and convey to the said Grantee(s) the following described real estate located in DOUGLAS County, NEVADA:

SEE ATTACHED EXHIBIT "A" FOR LEGAL DESCRIPTION

Also known as: 200 BEVERLY ROAD, STATELINE, NV 89449-6960

SUBJECT TO EASEMENTS, COVENANTS, CONDITIONS, RESTRICTIONS, RESERVATIONS, AND LIMITATIONS OF RECORD, IF ANY.

TO HAVE AND TO HOLD the lot or parcel above described together with all and singular the rights, privileges, tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining unto the said Grantee(s) and unto the heirs, administrators, successors or assigns of the Grantee(s) forever in FEE SIMPLE.

And that said conveyance does not render the Grantor(s) insolvent nor is it for the purpose of defrauding any of the creditors of the Grantor(s).

Tax ID No.: 1319-19-410-009

IN WITNESS WHEREOF, the said Grantor(s) has/have signed and sealed this deed, the day and year above written.

Michael P. Sullivan
MICHAEL P. SULLIVAN

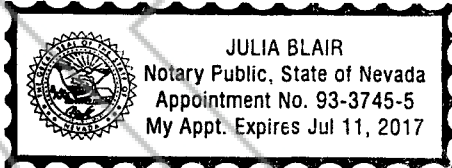
Christy M. Sullivan
CHRISTY M. SULLIVAN

STATE OF NEVADA
COUNTY OF Douglas

On March 31, 2015, before me, the undersigned, a notary public in and for said State personally appeared MICHAEL P. SULLIVAN personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon belief of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Julia Blair
NOTARY PUBLIC SIGNATURE
Julia Blair
Printed Name of Notary Public



My commission expires: July 11, 2017

STATE OF NEVADA
COUNTY OF Douglas

On March 31, 2017, before me, the undersigned, a notary public in and for said State personally appeared CHRISTY M. SULLIVAN personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon belief of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Julia Blair
NOTARY PUBLIC SIGNATURE
Julia Blair
Printed Name of Notary Public



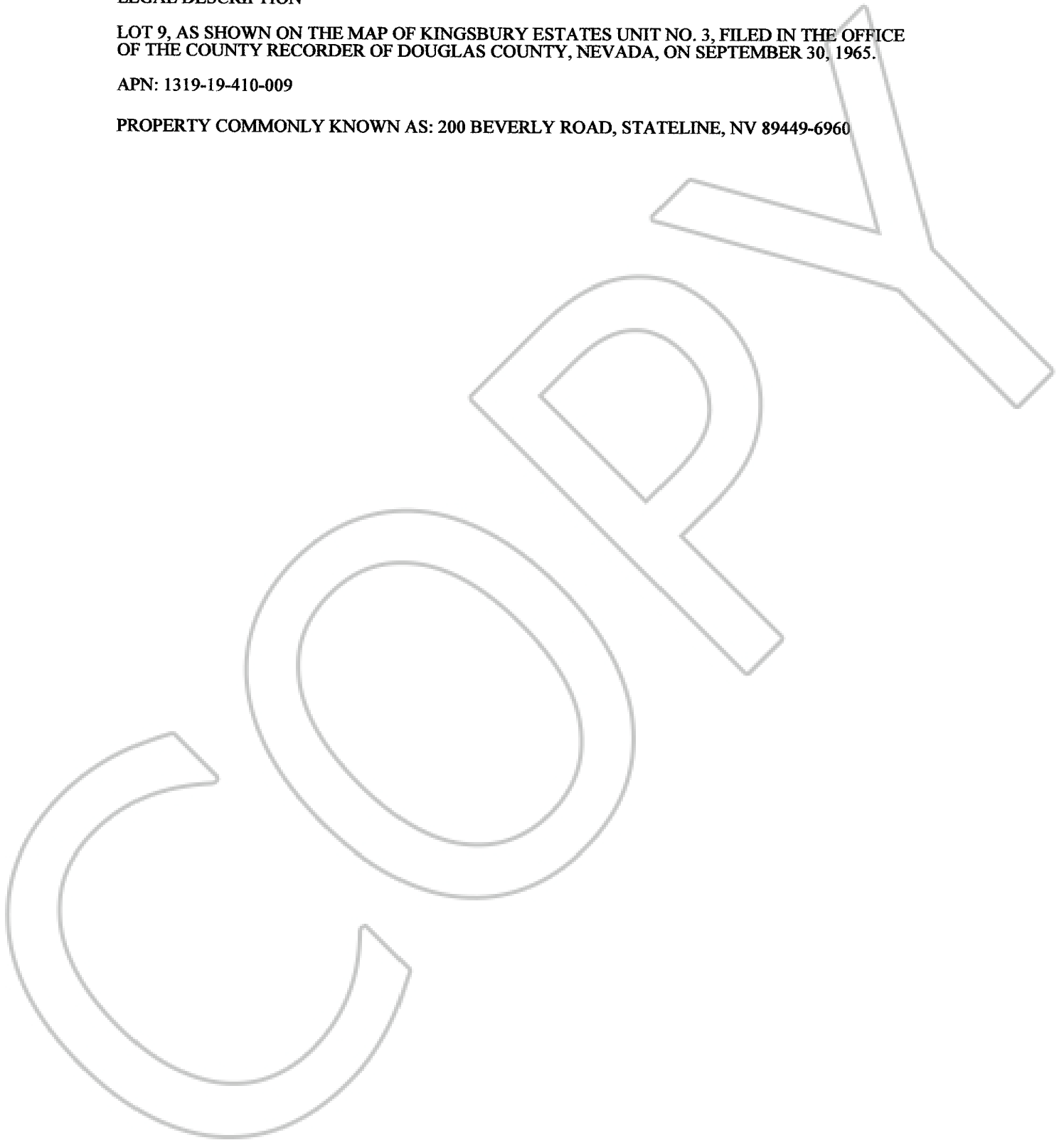
My commission expires: July 11, 2017

**EXHIBIT A
LEGAL DESCRIPTION**

**LOT 9, AS SHOWN ON THE MAP OF KINGSBURY ESTATES UNIT NO. 3, FILED IN THE OFFICE
OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON SEPTEMBER 30, 1965.**

APN: 1319-19-410-009

PROPERTY COMMONLY KNOWN AS: 200 BEVERLY ROAD, STATELINE, NV 89449-6960



State of Nevada Declaration of Value

1. **Assessor Parcel Number(s)**
 a) 1319-19-410-009 _____
 b) _____
 c) _____
 d) _____
2. **Type of Property:**
 a) Vacant Land b) Single Fam. Res.
 c) Condo/Twnhse d) 2-4 Plex
 e) Apt. Bldg. f) Comm'l/Ind'l
 g) Agricultural h) Mobile Home
 i) Other _____

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument # _____	Page: _____
Book: _____	Date of Recording: _____
Notes: SD~Trust	

3. **Total Value/Sales Price of Property:** \$ _____
 Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value per NRS 375.010, Section 2: \$ _____
 Real Property Transfer Tax Due: \$ 0.00

4. **If Exemption Claimed:**
 a. Transfer Tax Exemption, per NRS 375.090, Section: 7
 b. Explain Reason for Exemption: Transferring to grantors' trust for no consideration

5. **Partial Interest:** Percentage being transferred: 100 %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1% per month.

Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Michael P. Sullivan Capacity Grantor
 Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Dr. Michael Sullivan/Christy Sullivan
 Address: 200 Beverly Road
 City: Stateline
 State: NV Zip: 89449-6960

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: Michael P. Sullivan/Christy M. Sullivan, Trustees
 Address: 200 Beverly Road
 City: Stateline
 State: NV Zip: 89449-6960

COMPANY REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: GODEEDS, INC Escrow # _____
 Address: 8940 Main Street
 City: Clarence State: NY Zip: 14031