W

APN: Portion of 1319-15-000-020

R.P.T.T. \$ 1.95

RECORDING REQUESTED BY TRADING PLACES INTERNATIONAL 25510 COMMERCENTRE DR., SUITE 100 LAKE FOREST, CA 92630

WHEN RECORDED MAIL TO AND MAIL TAX STATEMENTS TO TRADING PLACES INTERNATIONAL 25510 COMMERCENTRE DR., SUITE 100 LAKE FOREST, CA 92630

Owner number: 296784

DOUGLAS COUNTY, NV RPTT:\$1.95 Rec:\$16.00

Total:\$17.95

2015-866395

07/16/2015 02:28 PM

DAVID WALLEYS RESORT

Pas=4



KAREN ELLISON, RECORDER

## GRANT, BARGAIN & SALE DEED

THIS INDENTURE WITNESSETH: That Walley's Property Owners Association, a Nevada non-profit corporation for good and valuable consideration, the receipt of which is hereby acknowledged, does hereby Grant, Bargain, Sell and Convey to 1862, LLC all that real property situate in the County of Douglas, State of Nevada, bounded and described in Exhibit "A" attached thereto and made a part hereof;

Walley's Property Owners Association, A Nevada non-profit corporation

BY: Trading Places International LLC

D1. Hading Haces international, LLC	7.	- %
ITS: Managing Agent	/	١.
\ \_	\	- \
	1	
BY:	)	
Stacey Shilling	/	- /
ITS: Chief Operating Officer		/
		/
State of California)		
)SS.		
)00.		
County of Orange)		
_		
On, before me, Me	elanie Nevar	ez, ì
Shilling, who proved to me on the basis of satisfactory e	vidence to be	the n

Shilling, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her authorized capacity, and that by her signature on the instrument, the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature \_\_\_\_\_(Seal)

## **CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.  State of California  County of Date  Date  personally appeared  Windows Date  personally who be name(%) Survey  personally appeared  Windows Date  personally who be of the Officer  personally appeared  Windows Date  personally who be name(%) Survey  personally appeared  Windows Date  personally who be of the Officer  personally appeared  Windows Date  personally who be name(%) Survey  personally appeared  Windows Date  personally who be of the Officer  personally appeared  Windows Date  personally who be name(%) Survey  personally appeared  Windows Date  personally appeared  Windows	######################################
County of	A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.
who proved to me on the basis of satisfactory evidence to be the personis) whose name(s) is/are-subecibed to the within instrument and acknowledged to me that he/she/ther executed the same in fils/her/ther authorized capacity(tes), and that by the/her/their signaturely on the instrument the personis, or the entity upon behalf of which the personis acted, executed the instrument.  I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.  WITNESS my hand and official seal.  WITNESS my hand and official seal.  Signature OPTIONAL  Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document:  Number of Pages:  Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name:  Corporate Officer — Title(s):  Partner —   Limited   General   Partner —   Limited   General   Individual   Attorney in Fact   Individual   Individual	County of Ovince
who 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/her executed the same in Tils/her/her authorized capacity(bes), and that by the/her/her instrument on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.  I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.  WITNESS my hand and official seal.  WITNESS my hand and official seal.  Signature of Notary Public  Place Notary Seal Above  OPTIONAL  Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document:  Number of Pages:  Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name:  Corporate Officer — Title(s):  Partner —   Limited   General   Partner —   Limited   General   Individual   Attorney in Fact   Individual   Individua	Or Date Defore me, Melane Ware, notain and Title of the Officer
who proved to me on the basis of satisfactory evidence to be the posson's) whose name(s) is/are-subscibed to the within instrument and acknowledged to me that he/she/her) executed the same in nis/her/her authorized capacity(res) and that by his/her/her instrument the person's) or the entity upon behalf of which the person(s) acted, executed the instrument the person's) or the entity upon behalf of which the person(s) acted, executed the instrument the person's) or the entity upon behalf of which the person(s) acted, executed the instrument the person's) or the entity upon behalf of which the person(s) acted, executed the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument the person(s) acted. Executed the instrument the person(s) acted, executed the instrument the person(s) acted. Executed the instrument in instrument the person(s) acted. Executed the instrument the person(s) acted. Executed the instrument the person(s) acted. Executed the instrument the person(s) acted the instrument the person(s) acted the instrument the person(s) acted the instrument the person(s) acted. Executed the instrument in the instrument the person(s) acted the instru	personally appeared Stack with
subscibed to the within instrument and acknowledged to me that He/she/her/Petr authorized capacity(tes) and that by their signature on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.  I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.  WITNESS my hand and official seal.  WITNESS my hand and official seal.  Signature OPTIONAL  Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document: Document Date:  Number of Pages: Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name: Signer's Name: Corporate Officer — Title(s): Corporate Officer —	
of the State of California that the foregoing paragraph is true and correct.  WITNESS my hand and official seal.  WITNESS my hand and official seal.  Signature Optional Signature of Notary Public  Place Notary Seal Above  Optional Signature of Notary Public  Optional Si	subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(les), and that by his/her/their signature(s) on the instrument the person(s).
Place Notary Public - California Orange County My Comm. Expires Jun 17, 2019  Place Notary Seal Above  Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document:  Number of Pages:  Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name:  Corporate Officer — Title(s):  Partner — Limited   General   Partner — Limited   General   Individual   Attorney in Fact   Individual   Attorney in Fact   Trustee   Guardian or Conservator   Other:  Other:	of the State of California that the foregoing paragraph
Place Notary Seal Above  OPTIONAL  Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document: Document Date: Number of Pages: Signer(s) Other Than Named Above: Signer's Name: Signer's Name: Signer's Name: Corporate Officer — Title(s): Corporate Officer — Title(s): Partner — Limited General Partner — Limited General Individual Attorney in Fact Individual Attorney in Fact Individual Attorney in Fact Corporate Guardian or Conservator Trustee Guardian or Conservator Other:	Commission # 2112411 Notary Public - California Orange County  Signature Melane New Page 2
Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.  Description of Attached Document  Title or Type of Document: Document Date:  Number of Pages: Signer(s) Other Than Named Above:  Capacity(ies) Claimed by Signer(s)  Signer's Name: Signer's Name: Corporate Officer — Title(s): Corporate Officer — Title(s): Partner — Limited General Partner — Limited General Individual Attorney in Fact Individual Attorney in Fact Trustee Guardian or Conservator Other:	
Description of Attached Document   Document Date:   Doc	
Title or Type of Document: Document Date: Number of Pages: Signer(s) Other Than Named Above: Signer(s) Claimed by Signer(s) Signer's Name: Signer's Name: Corporate Officer — Title(s): Corporate Officer — Title(s): Partner — Limited General Partner — Limited General Individual Attorney in Fact Individual Attorney in Fact Individual Attorney in Fact Trustee Guardian or Conservator Other: Other: Other:	
Signer's Name: Signer's Name: Corporate Officer — Title(s): Corporate Officer — Title(s): Partner —	Title or Type of Document: Document Date:
□ Corporate Officer — Title(s):       □ Corporate Officer — Title(s):         □ Partner — □ Limited □ General       □ Partner — □ Limited □ General         □ Individual □ Attorney in Fact       □ Individual □ Attorney in Fact         □ Trustee □ Guardian or Conservator       □ Trustee □ Guardian or Conservator         □ Other:       □ Other:	
□ Individual       □ Attorney in Fact       □ Individual       □ Attorney in Fact         □ Trustee       □ Guardian or Conservator       □ Trustee       □ Guardian or Conservator         □ Other:       □ Other:       □ Other:	
☐ Trustee ☐ Guardian or Conservator ☐ Trustee ☐ Guardian or Conservator ☐ Other: ☐	□ Partner — □ Limited □ General □ Partner — □ Limited □ General
□ Other: □ Other:	
Signer Is Representing: Signer Is Representing:	□ Other:
	Signer Is Representing: Signer Is Representing:

## Exhibit "A"

## LEGAL DESCRIPTION FOR DAVID WALLEY'S RESORT

The land referred to herein is situated in the

STATE of

Nevada

**County of** 

Douglas

and is described as follows:

**An undivided 1/2448**<sup>th</sup> **interest** in and to all that real property situate in the County of Douglas, State of Nevada, described as follows:

ADJUSTED PARCEL G: as shown on that Record of Survey to Support a Boundary Line Adjustment recorded on September 20, 2002 in the Office of the Douglas County Recorder as Document No. 0552536, adjusting that Record of Survey recorded April 29, 2002 as Document No. 0540898, pursuant to that Final Subdivision Map LDA #98-05 for DAVID WALLEY'S RESORT, a Commercial Subdivision, filed for record with the Douglas County Recorder on October 19, 2000, in Book 1000, at Page 3464, as Document No. 0501638, and by Certificate of Amendment recorded November 3, 2000, in Book 1100, Page 467, as Document No. 0502689, Official Records of Douglas County, Nevada.

Together with those easements appurtenant thereto and such easements and use rights described in the Declaration of Time Share Covenants, Conditions and Restrictions for David Walley's Resort recorded September 23, 1998, as Document 0449993, and as amended by Document Nos. 0466255, 04852265, 0489957, 0509920 and 0521436, and that Declaration of Annexation of David Walley's Resort Phase III recorded on July 2, 2003 in the Office of the Douglas County Recorder as Document No. 0582120 and subject to said Declaration; with the exclusive right to use said interest for **One Use Period** within a **TWO BEDROOM STANDARD UNIT Every Other Year in EVEN-numbered** years accordance with said declaration.

Together with a perpetual non-exclusive easement of use and enjoyment in, to and throughout the Common Area and a perpetual non-exclusive easement for parking and pedestrian and vehicular access, ingress and egress as set forth in Access Easement and Relocation recorded on May 26, 2006, in Book 0506 at Page 10729, as Document No 0676008, and Access Easement recorded on July 26 2006, in book 0706 at Page 9371, as Document No. 0680633, all of Official Records, Douglas County, Nevada.

Inventory No: 36023077282

Owner #: 296784

A Portion of APN: 1319-15-000-020

STATE OF NEVADA	
DECLARATION OF VALUE	
1. Assessor Parcel Number(s)	^
a) 1319-15-000-020	
b)	( )
c)	\ \
d)	\ \
	\ \
2. Type of Property:	\ \
a) Vacant Land b) Single Fam. Res.	
c) Condo/Twnhse d) 2-4 Plex	FOR RECORDERS OPTIONAL USE ONLY
e) Apt. Bldg f) Comm'l/Ind'l	BOOK PAGE
g) Agricultural h) Mobile Home	DATE OF RECORDING: NOTES:
i) Other Timeshare	TVOTES.
1) La Guisi Timodharo	
3. Total Value/Sales Price of Property:	\$ \$250.00
Deed in Lieu of Foreclosure Only (value of property)	
Transfer Tax Value:	\$
Real Property Transfer Tax Due:	\$\$1.95 V
4. If Exemption Claimed:	
a. Transfer Tax Exemption per NRS 375.090, Se	ction #
b. Explain Reason for Exemption:	<del>\</del>
5. Partial Interest: Percentage being transferred:	%
5. Tartial interest. Telephage being transferred.	<u></u>
The undersigned declares and acknowledges, under pe	nalty of periury, 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 substant	iate the information provided herein. Furthermore, the
parties agree that disallowance of any claimed exempti	
result in a penalty of 10% of the tax due plus interest a	
\ \	
Pursuant to NRS 375.030, the Buyer and Seller shall be joint	ly and severally liable for any additional amount owed.
	$a \mid a \mid (\alpha)$
Signature	Capacity
	Compatible
Signature	Capacity
SELLER (GRANTOR) INFORMATION	BUYER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Walley's Property Owners Association	1862, LLC
Print Name: P	rint Name:
Address: 25510 Commercentre, #100	Address: 3179 N. Gretna Road
	city: Branson
State: CA Zip: 92630 S	tate:Zip: 656 6
COLORAND/DEDGON DEGLECTRIC DECORDING	-
COMPANY/PERSON REQUESTING RECORDING	
(required if not the seller or buyer) Print Name: Linda Rawson	Escrow # OWNER # 296784
Address: 25510 Commercentre, #100	LOCION II X 1 Y 1 O
City: Lake Forest State: CA	Zip: 92630
(AS A PUBLIC RECORD THIS FORM M	
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