155-17 10-DOUGLAS COUNTY, NV 2015-8714 10/19/2015 04:12 PM Total:\$15.00 ALLING & JILLSON LTD APN# 1220-03-201-007 & 1220-03-201-008 Recording Requested by/Mail to: Name: ALLING & JILLSON, LTD KAREN ELLISON, RECORDER Address: Post Office Box 3390 City/State/Zip: Lake Tahoe, NV 89449-3390 Mail Tax Statements to: Name: ____ n/a Address: City/State/Zip: _____ LIMITED POWER OF ATTORNEY Title of Document (required) -----(Only use if applicable) -----The undersigned hereby affirms that the document submitted for recording contains personal information as required by law: (check applicable) Affidavit of Death - NRS 440.380(1)(A) & NRS 40.525(5) Judgment - NRS 17.150(4)

This document is being (re-)recorded to correct document # ______, and is correcting

Military Discharge - NRS 419.020(2)

Signature

Printed Name

Richard J. McGuffin, Esq.

\$1.00 Additional Recording Fee for Use of This Page

LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

That I, JOHN MILAZZO, of Douglas County, Nevada, have made, constituted and appointed, and by these presents do make, constitute and appoint, CRISTI CRISTICH-MILAZZO, of Douglas County, Nevada, my true and lawful attorney for me, and in my name, place and stead, and for my use and benefit, to examine and/or execute any and all documents and records in connection with the purchase and sale of the property located at 1330 Stodick Parkway, Gardnerville, NV 89410, currently known as Crestmore Village Apartments.

I further grant and give unto my said attorney full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and for the above-referenced matter, as fully to all intents and purposes as I might or could do if I personally present, with full power of substitution or revocation, and I hereby ratify and confirm all that my said attorney, or her substitute or substitutes, shall lawfully do or cause to be done by virtue of these presents.

This Power of Attorney is not affected by the subsequent disability of the principal. This Power of Attorney shall be valid for thirty (30) days from the date of execution.

WITNESS my hand this 16th day of October, 2015.

JOHN MILAZZO

STATE OF NEVADA

:ss.

COUNTY OF DOUGLAS

This instrument was acknowledged before me on October <u>//</u>, 2015, by JOHN MILAZZO. WITNESS my hand and official seal.

NOTARY PUBLIC

