

Prepared By And Return To:  
Timeshare Wholesalers of Pigeon Forge, LLC  
1338 Parkway, Suite 3, Sevierville, Tennessee 37862

DOUGLAS COUNTY, NV      **2016-876270**  
Rec:\$15.00  
\$15.00      Pgs=2      **02/04/2016 10:21 AM**  
TIMESHARE WHOLESALERS OF PIGEON FORGE  
KAREN ELLISON, RECORDER

**LIMITED DURABLE POWER OF ATTORNEY**

**KNOW ALL MEN BY THESE PRESENTS:**

That the undersigned Chandler S. Eason, Jr., Trustee of the Eason Trust A dated January 2, 1991 u/a/d July 12, 1978 ("Grantor(s)"), being of legal age, DO(ES) HEREBY CONSTITUTE(S) and appoint(s) Felix Valdes, also of legal age, as Grantor(s) true and lawful Attorney-In-Fact for, and on behalf, and in Grantor(s) name, place and stead to do any, and all, of the following acts: To perform any, and all, acts necessary to convey the real, and personal property, legally described below.

RESORT: The Ridge Tahoe, The Plaza Bldg      UNIT #: Plaza Bldg      WEEK #: 37-147-35-02

OTHER LEGAL DESCRIPTION: \_\_\_\_\_

This power includes, but not limited, to contacting the resort and/or exchange company on Grantor(s) behalf, making inquiries into the status of accounts affecting this property, making reservations, banking weeks, ordering death certificates, collecting proceeds, executing any and all documents, notarial or otherwise, in the names as written below, or in other form, and all other issues that are deemed necessary in Attorney-In-Fact's discretion to carry out the transfer of said property. This power shall not be affected by the disability of the Grantor(s). Grantor(s)'s Attorney-In-Fact has the power to perform all and every act, and thing, fully and to the same extent as the Grantor(s) could do if personally present, with full power of substitution and revocation.

AND THE GRANTOR(S) DO(ES) HEREBY RATIFY AND CONFIRM all whatsoever that the said Attorney-In-Fact, shall do or cause to be done by virtue of the powers hereby granted.

GRANTOR(S) SIGNATURE: Chandler S. Eason Jr., Trustee

PRINT NAME(S): Chandler S. Eason, Jr., Trustee of the Eason Trust A dated January 2, 1991 u/a/d July 12, 1978

GRANTOR(S) SIGNATURE: \_\_\_\_\_

PRINT NAME(S): \_\_\_\_\_

Grantor(s) signature(s) is/are attested by these witnesses who are NOT the Grantor(s).

WITNESS SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

WITNESS SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

NOTARY FORM: STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public, do hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared before me Chandler S. Eason, Jr., Trustee of the Eason Trust A dated January 2, 1991 u/a/d July 12, 1978, who appoints Felix Valdes as Attorney-In-Fact, known to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the foregoing instrument, and swore, and acknowledged, to me that he/she/they executed the same for the purpose, and in the capacity, therein expressed, and that the statements contained therein are true and correct.

Witness my hand and official seal:

Notary Signature: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

SEE ATTACHED ACKNOWLEDGEMENT

*we*

**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 Contra Costa

On 11/12/2015 before me, Williams Oritsejube Ejuwa, xOlani/Paloke

Date

Here Insert Name and Title of the Officer

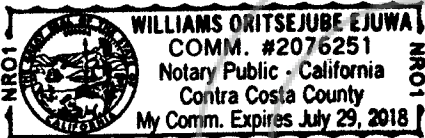
personally appeared Chandler Streeton Eason

Name(s) of Signer(s)

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/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 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.



Signature [Signature]  
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: Limited Durable Power of Attorney

Document Date: 11/12/2015 Number of Pages: 1

Signer(s) Other Than Named Above: NONE

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: Chandler S. Eason

- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Individual  Attorney in Fact
- Trustee  Guardian or Conservator
- Other: \_\_\_\_\_

Signer Is Representing: Self

Signer's Name: \_\_\_\_\_

- Corporate Officer — Title(s): \_\_\_\_\_
- Partner —  Limited  General
- Individual  Attorney in Fact
- Trustee  Guardian or Conservator
- Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_