

APN: Portion of 1319-15-000-015

RECORDING REQUESTED BY

Stewart Vacation Ownership
11870 Pierce St., Suite 100
Riverside, CA 92505

WHEN RECORDED MAIL TO:

Tiffany Elizabeth Majeau
52 Marlin Rd.
Sandy Hook, CT 06482

190234 / 73309

RECORDERS USE ONLY

AFFIDAVIT-DEATH OF TRUSTEE

STATE OF CONNECTICUT

ss. Newtown

COUNTY OF FAIRFIELD

Tiffany Elizabeth Majeau, of legal age, being duly sworn, deposes and says

That DeWitt Clinton Smith, the decedent mentioned in the attached Certificate of Death, is the same person as D. Clinton Smith named as one of the Trustees of that certain Declaration of Trust dated October 23, 2002 and designated the Smith Living Trust in Deed recorded February 14, 2003 as Document No. 0567167 in Book 0203 at Page 05486+05487.

In accordance with the above referenced trust, Richard Gibson Smith and Tiffany Elizabeth Majeau shall act as Successor Co-Trustees of said trust on the death of D. Clinton Smith.

Tiffany Elizabeth Majeau is filing this Affidavit with the Douglas County Recorder to establish the succession of Richard Gibson Smith and Tiffany Elizabeth Majeau, as Successor Co-Trustees pursuant to the aforesaid trust. The trust estate includes an interest in real property located in Douglas County, State of Nevada, which is more fully described in Exhibit "A" attached hereto and incorporated herein by reference.

Dated: March 25, 2016

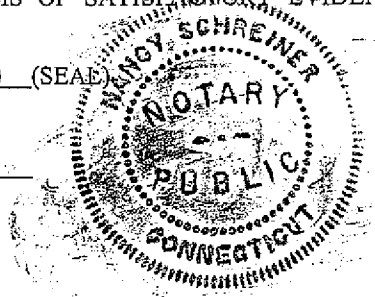
X Tiffany Elizabeth Majeau
Tiffany Elizabeth Majeau
CTDL [redacted] 3671

STATE OF Connecticut)
)ss. Newtown
COUNTY OF Fairfield)

SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME Nancy Schreiner
NOTARY PUBLIC ON THIS 30th DAY OF March 2016, BY Tiffany Elizabeth Majeau, PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSON(S) WHO APPEARED BEFORE ME.

SIGNATURE Nancy Schreiner (SEAL)
NOTARY PUBLIC

NOTARY EXPIRATION DATE: 9/30/20



GOVERNMENT CODE 27361.7

I certify under penalty of perjury that the Notary Seal on the document to which this statement is attached reads as follows:

NAME OF NOTARY:

Nancy Schreiner

DATE COMMISSION EXPIRES:

September 30, 2020

COUNTY WHERE BOND IS FILED:

Fairfield County, CT

COMMISSION NUMBER:

N/A

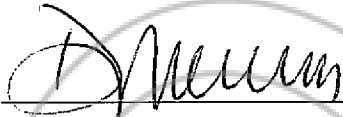
VENDOR NUMBER

N/A

PLACE OF EXECUTION: Riverside County

DATED: 7/5/2016

SIGNATURE:



Nancy Schreiner

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 1/3978th interest in and to all that real property situate in the County of Douglas, State of Nevada, described as follows:

PARCEL E-1 of the 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, at Page 467, as Document No. 0502689, Official Records of Douglas County, Nevada.

Together with a permanent non-exclusive easement for utilities and access, for the benefit of **Parcel E-1**, as set forth in Quitclaim Deed recorded September 17, 1998, in Book 998, at Page 3250, as Document No. 0449574, Official Records, 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 No. 0449993, and as amended by Document Nos. 0466255, 0485265, 0489957, 0509920 and 0521436, and subject to said Declaration; with the exclusive right to use said interest for **One Use Period** within a **"STANDARD UNIT"** every other year in **EVEN-numbered years** in 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.: 17-049-20-81

STATE OF NEVADA
WASHOE COUNTY HEALTH DISTRICT
 VITAL STATISTICS - RENO, NEVADA
CERTIFICATE OF DEATH

2015015102
 STATE FILE NUMBER

TYPE OR
 PRINT IN
 PERMANENT
 BLACK INK

DECEDENT

IF DEATH
 OCCURRED IN
 INSTITUTION SEE
 HANDBOOK
 REGARDING
 COMPLETION OF
 RESIDENCE
 ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF
 DEATH

CONDITIONS IF
 ANY WHICH
 GAVE RISE TO
 IMMEDIATE
 CAUSE
 STATING THE
 UNDERLYING
 CAUSE LAST

1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) DeWitt Clinton SMITH		2. DATE OF DEATH (Mo/Day/Year) August 16, 2015		3a. COUNTY OF DEATH Washoe	
3b. CITY, TOWN, OR LOCATION OF DEATH Reno		3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street and No. If Hosp. or Inst. indicate DOA, OPI/Emer. Rm. Inpatient(Specify) 3201 Plumas Street #379		4. SEX Male	
5. RACE White (Specify)		6. Hispanic Origin? Specify No - Non-Hispanic		7a. AGE-Last birthday, 7b. UNDER 1 YEAR (Years) 74	
9a. STATE OF BIRTH (If not U.S.A., Colorado)		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 18	
11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify/Divorced)		12. SURVIVING SPOUSE (Maiden name)			
13. SOCIAL SECURITY NUMBER ██████████-9948		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of)		14b. KIND OF BUSINESS OR INDUSTRY Chemical	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Washoe		15c. CITY, TOWN OR LOCATION Reno	
15d. STREET AND NUMBER 3201 Plumas Street #379		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes			
16. FATHER/PARENT - NAME (First Middle Last - Suffix) Richard Gibson SMITH			17. MOTHER/PARENT - NAME (First Middle Last - Suffix) Jane ROSS		
18a. INFORMANT - NAME (Type or Print) Tiffany Elizabeth MAJEAU			18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 52 Marlin Road Sandy Hook, Connecticut 06482		
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Sierra Crematory		19c. LOCATION City or Town State Reno Nevada 89503	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) RICHARD HEARN SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE NUMBER 228		20c. NAME AND ADDRESS OF FACILITY Northern Nevada Cremation and Burial 10101 S Virginia Reno NV 89511	
TRADE CALL - NAME AND ADDRESS					
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) NATALIA L BALDO SIGNATURE AUTHENTICATED		22a. On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title)			
21b. DATE SIGNED (Mo/Day/Yr) August 26, 2015		21c. HOUR OF DEATH 03:26		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22d. PRONOUNCED DEAD (Mo/Day/Yr)		22e. PRONOUNCED DEAD AT (Hour)	
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Natalia L Baldo 8040 S. Virginia Ste. 4 Reno, NV 89557				23b. LICENSE NUMBER 13170	
24a. REGISTRAR (Signature) BRIDGES SANDI SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) September 04, 2015		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)				Interval between onset and death	
PART I (a) Cardiac Arrest				Interval between onset and death	
(b) DUE TO, OR AS A CONSEQUENCE OF: Atrial Flutter, Respiratory Failure				Interval between onset and death	
(c) DUE TO, OR AS A CONSEQUENCE OF: Diabetes Mellitus 2, Hypertension, Chronic Respiratory Failure				Interval between onset and death	
(d)				Interval between onset and death	
PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part I				26. AUTOPSY (Specify Yes or No) No	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) Yes					
28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY	
28d. DESCRIBE HOW INJURY OCCURRED					
28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY-At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE	

STATE REGISTRAR

CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

9/8/2015

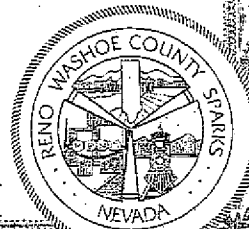
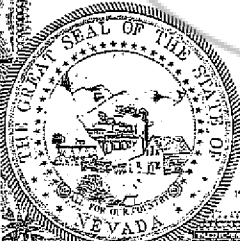
DEPUTY REGISTRAR

SIGNATURE AUTHENTICATED

DATE ISSUED:

This copy not valid unless prepared on engraved border displaying date, seal and signature of Registrar.

VRS-Rev-20120523a



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