

A ptn of APN: 1319-30-644-071

Escrow No.: #37-162-26-81 / 20161377

Recording Requested By:
Stewart Vacation Ownership

Mail Tax Statements to:
Ridge Tahoe P.O.A.
P.O. Box 5790
Stateline, NV 89449

When Recorded Mail to:
Carolyn Granato
5 Lake Linden Dr.
Bluffton, SC 29910



00044154201608887950050053

KAREN ELLISON, RECORDER

AFFIDAVIT OF DEATH OF JOINT TENANT
(Title of Document)

This page added to provide additional information required by NRS 111.312 Sections 1-2.
(Additional recording fee applies)

This cover page must be typed or legibly hand printed.

AFFIDAVIT OF DEATH OF JOINT TENANT

STATE OF South Carolina }

SS

COUNTY OF Beaufort }

BEFORE ME, the undersigned Notary Public, personally appeared, CAROLYN GRANATO, "Affiant", who upon being duly sworn, deposes and states upon his or her oath or affirmation, the following:

1. My name is CAROLYN GRANATO and I reside at 5 Lake Linden Dr. Bluffton SC 29910

2. I owned real property as a joint tenant with JAMES GRANATO, such real property located in DOUGLAS County, State of NEVADA, described as follows:

See Attached Legal Description.

Title deed is recorded in Book 791, Page 3644 in the office of the register of deeds in the county of Douglas, state of Nevada.

3. JAMES GRANATO, my joint tenant identified above, departed this life on the 3RD day of AUGUST, 2015. A copy of the death certificate of JAMES GRANATO is attached.

4. On the date of the death of JAMES GRANATO, the above described real estate was owned by JAMES GRANATO and CAROLYN GRANATO, as joint tenants and the joint tenancy had not been severed by any act of the parties or by operation of law.

5. Affiant is the sole surviving joint tenant of the property described above.

Dated this the 22 day of August, 2016.

Carolee Garato
Affiant

SWORN TO AND SUBSCRIBED before me this the 22 day of August,
2016.

Barbara Morrow
NOTARY PUBLIC

My Commission Expires: 07.07.2019

- 1 -



BARBARA E. MORROW
Notary Public.
Beaufort County, South Carolina
My Comm. Expires July 7, 2019

STATE OF NEW JERSEY

NEW JERSEY DEPARTMENT OF HEALTH CERTIFICATE OF DEATH

STATE FILE NUMBER
20150042311

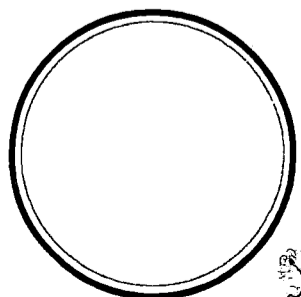
1a. Legal Name of Decedent (First, Middle, Last, Suffix) JAMES GRANATO				LIMB ONLY <input type="checkbox"/>
1b. Also Known As (AKA), If Any (First, Middle, Last, Suffix)				
2. Sex Male	3. Social Security Number -2584	4a. Age 60 Years	5. Date of Birth (Mo/Day/Yr) 11/15/1954	
6. Birthplace (City & State/Foreign Country) Morristown, New Jersey				
7a. Residence-State New Jersey	7b. County Morris	7c. Municipality/City Madison Borough		
7d. Street and Number 38 Niles Avenue		7e. Apt No.	7f. Zip Code 07940	7g. Inside City Limits? Yes
8a. Ever in US Armed Forces? No	8b. If Yes, Name of War:		8c. War Service Dates (From/To):	
9. Domestic Status at Time of Death Divorced		10. Name of Surviving Spouse/Partner (Name given at birth or on birth certificate)		
11. Father's Name (First, Middle, Last) John Granato				
12. Mother's Name Prior to First Marriage (First, Middle, Last) Philomena Infinito				
13a. Name of Informant Angela Klein			13b. Relationship to Decedent Daughter	
13c. Mailing Address (Street and Number, City, State, Zip Code) 139 Richard Mine Road, Dover, NJ 07801				
14. Method of Disposition Cremation	15. Place of Disposition (name of cemetery, crematory, other) Somerset Hills Crematory		16. Location- City & State/Foreign Country Bernards Township, New Jersey	
17. Name and Complete Address of Funeral Facility Madison Memorial Home, 159 Main Street, Madison, NJ 07940-2156				
18. Electronic Signature of Funeral Director <i>Philip Mangiafridda</i>			19. NJ License Number 23JP00314900	
20. Decedent Education High school graduate or GED completed		21. Decedent of Hispanic Origin? Not Spanish / Hispanic / Latino	22. Decedent Race White	
23. Occupation of Decedent (Type of work done most of life, even if retired) Service Manager		24. Kind of Business/Industry Automobile		
25. Name and Address of Last Employer Royal Cadillac, Florham Park, NJ 07932				
26. Date Pronounced Dead (Mo/Day/Yr) 08/03/2015		28. Name of Person Pronouncing Death <i>Inga Harbuz-Miller</i>		
27. Time Pronounced Dead (24-hr) 0620	29. License Number Medical Resident		30. Date Signed (Mo/Day/Yr) 08/03/2015	
31. Date of Death (Mo/Day/Yr) 08/03/2015	32. Time of Death (24-hr) 0620	33. Was Medical Examiner Contacted? No	34. Place of Death Hospital: Inpatient	
35a. Facility Name (If not institution, give street and number) Morristown Memorial Hospital				
35b. Municipality Morristown Town		35c. County Morris		
CAUSE OF DEATH: 36a. PART I - IMMEDIATE CAUSE - final disease or condition resulting in death. Subsequently list conditions, if any, leading to the cause listed on Line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST.				
Immediate Cause a. bladder cancer			Interval Between Onset and Death 8 months	
Due to (or as a consequence of): b. Due to (or as a consequence of): c. Due to (or as a consequence of): d.				
36b. PART II - Enter other significant conditions contributing to death but not resulting in underlying cause given in PART I.			37. Was an Autopsy Performed? No	
38. Were Autopsy Findings Available to Complete Cause of Death? Not Applicable				
39. Date of Injury (Mo/Day/Yr)	40. Time of Injury (24-hr)	41. Place of Injury (e.g. home, construction site, restaurant)		42. Injury at work?
43a. Location of Injury (Number and Street, Zip Code)		43b. Municipality	43c. County	43d. State
44. Describe How Injury Occurred			45. If Transportation Injury:	
46. Manner of Death Natural		47. Did Decedent Have Diabetes? No	48. Did Tobacco Use Contribute to Death? No	49. If Female, Pregnancy State Not applicable
50. Certifier Type Certifying Physician		51. Name, Address, and Zip Code of Certifier Michael Anthony Scola, M.D. Hematology Oncology Associates Carol G Simon Cancer Center, Morristown, NJ 07962-1089		
52. Electronic Signature of Certifier <i>Michael Anthony Scola</i>		53. License Number 25MA07495100	54. Date Certified (Mo/Day/Yr) 08/03/2015	
55. Electronic Signature of Local Registrar <i>Melanie Politi</i>		56. District No. V1434	57. Date Received 08/03/2015	Case ID Number 1770585

Record Contains Amendment

DATE ISSUED: **August 03, 2015**
ISSUED BY:
Madison Borough
Joanne Grillo, Local Registrar

This is to certify that the above is correctly copied from a record on file in my office.
Certified copy not valid unless the raised Great Seal of the State of New Jersey or the seal of the issuing municipality or county, is affixed hereon.

Vincent T. Arrisi
Vincent T. Arrisi
State Registrar
Office of Vital Statistics and Registry



REG-42B
JUN 14



THIS DOCUMENT CONTAINS A UNIQUE STATE OF NJ WATERMARK HOLD AT LIGHT TO VERIFY

THIS DOCUMENT CONTAINS A UNIQUE STATE OF NJ WATERMARK HOLD AT LIGHT TO VERIFY

EXHIBIT "A"

(37)

An undivided 1/102nd interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/106th interest in and to Lot 37 as shown on Tahoe Village Unit No. 3 - 13th Amended Map, recorded December 31, 1991, as Document No. 268097, re-recorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 039 through 080 (inclusive) and Units 141 through 204 (inclusive) as shown on that certain Condominium Plan recorded July 14, 1988, as Document No. 182057; and (B) Unit No. 162 as shown and defined on said Condominium Plan; together with those easements appurtenant thereto and such easements described in the Fourth Amended and Restated Declaration of Time Share Covenants, Conditions and Restrictions for The Ridge Tahoe recorded February 14, 1984, as Document No. 096758, as amended, and in the Declaration of Annexation of The Ridge Tahoe Phase Five recorded August 18, 1988, as Document No. 184461, as amended, and as described in the Recitation of Easements Affecting the Ridge Tahoe recorded February 24, 1992, as Document No. 271619, and subject to said Declarations; with the exclusive right to use said interest in Lot 37 only, for one week every other year in the Even -numbered years in the Prime "Season" as defined in and in accordance with said Declarations.

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