

APN# : 1221-06-001-019

Recording Requested By:
Western Title Company, Inc.
Escrow No.: 086919-TEA

When Recorded Mail To:
Samual Shirakhon
1587 15th Street #403
San Francisco, CA
94103

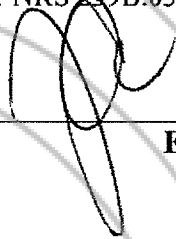
Mail Tax Statements to: (deeds only)

(space above for Recorder's use only)

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons.
(Per NRS 239B.030)

Signature _____

Traci Adams



Escrow Officer

Durable Power of Attorney for Sale of Real Estate

This page added to provide additional information required by NRS 111.312
(additional recording fee applies)

DURABLE POWER OF ATTORNEY FOR SALE OF REAL ESTATE

BY THIS DURABLE POWER OF ATTORNEY, I, Elizabeth Kotalik make, constitute, and appoint Samuel Shirakhan, who is my Son (relation), and who I will refer to as my "Attorney", as my true and lawful attorney to act for me and in my name, place and stead. I intend this instrument to be exercisable until revoked. My Attorney's powers are limited to the following:

REAL PROPERTY: The powers of the Attorney include, but are not limited to, at public or private sale, the right to buy, sell, convey, bargain, assign, grant, transfer, lease and grant options or amend or modify any leases or options, on any and all real property owned by me now or in the future, including my homestead. Also, my Attorney may exchange, borrow against or mortgage any real property owned by me. Also, my Attorney may obtain liability, property damage, theft, flood, and any other type insurance. It is unnecessary to identify each piece of real property as my holdings might change over time.

Or

REAL PROPERTY: The powers of the Attorney include the right to contract for the sale and execute all documents necessary to sell or transfer the following described property:

Street Address of Property: 2140 Fish Springs Rd, Gardnerville NV
Legal Description of Property, if known: 89410

INDEMNIFY THIRD PARTIES: I hereby indemnify and hold harmless any and all third parties who rely on this Durable Power of Attorney and who have no knowledge of its revocation or its having been amended.

This is intended as a "Durable Power of Attorney" within the meaning of State Statutes. This Durable Power of Attorney shall not be affected by my disability, incapacity, or incompetence, except as provided by statute.

IN WITNESS WHEREOF, I have executed this power of attorney on January 27, 2017

Signed, sealed and delivered in the presence of:

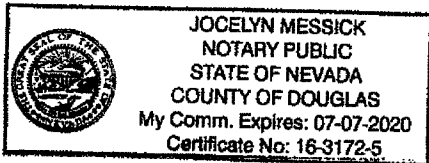
Elizabeth Kotalik _____

Elizabeth Kotalik _____

STATE OF NV;
COUNTY OF Douglas;

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared Elizabeth N. Kotalik, who is personally known to me or who has presented a driver's license as identification, to me known to be the person described in and who executed the foregoing and acknowledged before me that he/she executed the same.

WITNESS my hand and official seal in the County and State last aforesaid on 1/27/17.



Jocelyn Messick
Notary Public Signature
MY COMMISSION EXPIRES: 07/07/20

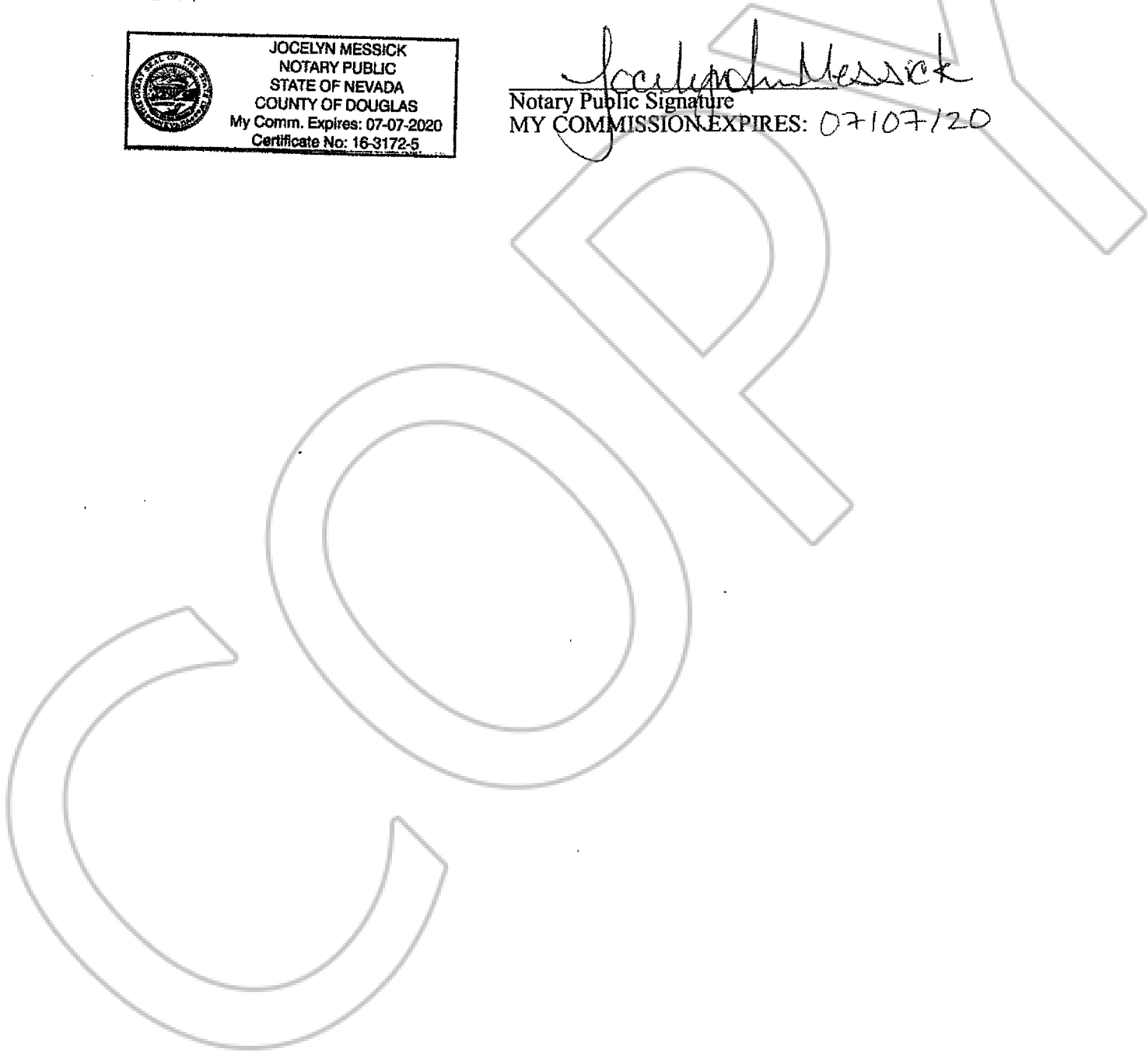


EXHIBIT "A"

**All that certain real property situate in the County of Douglas, State of Nevada,
described as follows:**

**Lot 17 of FISH SPRINGS ESTATES, according to the map thereof, filed for record in
the office of the County Recorder of Douglas County, Nevada, on August 30, 1973, in
Book 873, Page 1006 as Document No. 68451.**

**Assessor's Parcel Number(s):
1221-06-001-019**

