| APN# A portion of 1319-30-644-102 | STEWART TITLE VACATION OWNERSHIP KAREN ELLISON, RECORDER |
|--|--|
| Recording Requested by/Mail to: | |
| Name: Stewart Vacation Ownership | \ \ |
| Address: 3476 Executive Pointe Way Ste#16 | \ \ |
| City/State/Zip: Carson City, NV 89706 | |
| Mail Tax Statements to: | |
| Name: Resorts West Vacation Club | |
| Address: P.O. Box 5790 | |
| City/State/Zip: Stateline, NV 89449 | |
| Affidavit - Death of Trustee | |
| Title of Document (require | ed) |
| The undersigned hereby affirms that the document | |
| contains personal information as required by lav | |
| x Affidavit of Death – NRS 440.380(1)(A) |) & NRS 40.525(5) |
| Judgment – NRS 17.150(4) | |
| Military Discharge – NRS 419.020(2) | |
| Laisilera Morton | |
| Signature | |
| Daisilena IV lorton | |
| Printed Name | |
| This document is being (re-)recorded to correct document # | , and is correcting |

DOUGLAS COUNTY, NV

Pgs=5

Rec:\$18.00

\$18.00

2017-900166

06/16/2017 11:18 AM

A portion of APN: 1319-30-644-102

RECORDING REQUESTED BY

STEWART VACATION OWNERSHIP

WHEN RECORDED MAIL TO:

Joyce Anthony, Trustee of the Yirchott Family Trust 350 Second St., Suite 2 Los Altos, CA 94062

Escrow No: 37-191-24-02 / 20170751

RECORDERS USE ONLY

AFFIDAVIT – DEATH OF TRUSTEE

STATE OF Colfornia ss.

JOYCE ANTHONY, of legal age, being duly sworn, deposes and says

That CHARLES R. YIRCHOTT and NANCY N. YIRCHOTT, the decedents mentioned in the attached Certificates of Death, are the same persons as CHARLES R. YIRCHOTT and NANCY N. YIRCHOTT named as the Co-Trustees of that certain YIRCHOTT FAMILY TRUST dated November 15, 2006 and designated the Co-Trustee in the Deed recorded in Douglas County, State of Nevada on December 28, 2007 in Book 1207 at Page 5980 as Document No. 715375.

In accordance with the above referenced trust, JOYCE ANTHONY and BONNIE BURDETT shall act as successor trustees of said trust on the death of CHARLES R. YIRCHOTT and NANCY N. YIRCHOTT. The Trust further provides that either successor trustee may act alone upon authorization from the other trustee, which authorization has been given by each to the other.

JOYCE ANTHONY is filing this Affidavit with the Douglas County Recorder to establish the succession of JOYCE ANTHONY and BONNIE BURDETT, as successor trustees pursuant to the aforesaid trust. The trust estate includes an interest in real property located in Douglas County, State of Neyada, which is more fully described in **Exhibit 'A'** attached hereto and incorporated herein by reference.

en(SEAL)

Dated:

Joyce Anthony, Trustee of the Yirchott Family Trust

STATE OF

COUNTY OF Santa C

SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME ON THIS

ME OR PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSON(S)

WHO APPEARED BEFORE ME.

SIGNATURE

NOTARY PUBLĂC

DEBORAH L. PENDER Commission # 2027458 Notary Public - California Santa Clara County My Comm. Expires Jun 6, 2017

SHAND DONNORD BOWN

CERTIFICATION OF VITAL RECORD

COUNTY of SANTA CLARA

PUBLIC HEALTH DEPARTMENT VITAL RECORDS AND REGISTRATION

| | STATE FILE NUMBER | CERTIF | ICATE OF DEATH TATE OF CALIFORNIA O ERASURES, WHITEOUTS OR ALTERATIONS VS-114REV 3/05) | 2000 | 3201443003 | 457741 C |
|------------------------------|---|--|--|---|--|--|
| ¥ | 1, NAME OF DECEDENT- FIRST (Given) CHARLES | 2. MICOLE ROBERT | 3. L | AST (Family) RCHOTT | LOCAL REGISTRATION | NUMBER |
| PERSONAL DATA | AKA, ALSO KNOWN AS - Include (LIT AKA (FIRST; MIDDLE, LAST CHARLES ROBERT YIRCHOTT | | 14. DATE OF BIRTH mm/dc 01/06/1940 | Vocyy 5. AGE Yrs. Fundanti | VOER ONE YEAR IF (| INDER 2± HCUAS 6. SEX |
| | 9. BIRTH STATE/FOREIGN COUNTRY 10. SOCIAL SECUR NORTH DAKOTA 894 | ITY NUMBER 11. EVER IN U.S | ARMED FORCEST 12 MARITAL STA | TUS/SRDP* (at Time of Death) 7. D | ATE OF DEATH mm/du | ccyy 8. HOUR (24 Hours) |
| DENT'S | 13. EDUCATION - Highest Level/Degree 14/15, WAS DECEDENT HISPA (see worksheet on back) BACHELOR YES | | | RACE - Up to 3 races may be | | |
| DECE | 17. USUAL OCCUPATION - Type of work for most of life. DO NOT VICE PRESIDENT | USE RETIREO 18, KIN | D OF BUSINESS OR INDUSTRY (e.g., gr | ocery store, road construction, s | employment agency, etc. | 19. YEARS IN OCCUPATION |
| 병 | 20. DECEDENT'S RESIDENCE (Street and number, or location) 11 TRILLIUM LANE | | | (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c | | 1 00 |
| USUAL | 21. CITY 22 | COUNTY/PROVINCE | 23. ZIP GODE 94070 | 25. STATE/FÖREIGN-COUNTRY. CALIFORNIA | | |
| FOR- | 26. INFORMANTS NAME, RELATIONSHIP JOHN NOREN, BROTHER-IN-LAW 25. PARKSIDE WAY, GR | | | | ***** | |
| ON NOI | 28. NAME OF SURVIVING SPOUSE/SRDP-FIRST | 29. MIODLE | 30z LAST. (Bi | | | |
| SRDP AN | 31. NAME OF FATHER/PARENT-FIRST | 32: MIDDLE | 93, LAST | | | 34. BIRTH STATE |
| OUSE/S | CHARLES 35. NAME OF MOTHER/PARENT—FIRST | ROBERT 35. MIDDLE | YIRCH 37. last (BI | | | N. DAKOTA 38. BIRTH STATE |
| . PA | MARY 39. DISPOSITION DATE: mm/dd/ccyy: 40. PLACE OF FINAL DI | M. SPOSITION CYPRESS L | ADAM AWN MEMORIAL PA | | | WISCONSIN |
| RECTO | 04/25/2014 1370 EL CAN 41. TYPE OF DISPOSITION(S) | MNO REAL, COLM | A, CA 94014 E OF EMBALMER | | | 43: LICENSE NUMBER |
| ERAL D | BU 44. NAME OF FUNERAL ESTABLISHMENT | ▶ MAR) | ANN CRUZ UMBER 48. SIGNATURE OF LOCAL F | FGISTRAH - | 63) | EMB 8867 |
| 돌의 | 44, NAME OF FUNERAL ESTABLISHMENT CYPRESS LAWN FUNERAL HOM | E FD 1797 | ▶ SARA H COL | Y, MD | / EB | 04/21/2014 |
| CE OF ATH | STANFORD HOSPITAL | ESS OR LOCATION WHERE FOUND | * ******* **** ******************* | OP DOA Hospic | Home/L/C | Decadent's Other |
| 1 2 | SANTA CLARA 300 PASTE | ÜR DR | | | STANFOR | |
| Aud I | as carded arrest, respirati | ory arrest, or ventricular librillation withou | that directly caused death, DO NOT ente ut showing the stology. DO NOT ABBREVI | ATE. | Onset and Death | 108. DEATH FEFTOFITED TO COPHONER. YES X NO REFERRAL EXAMPLES |
| | (Final disease or condition resulting in death) Sequentially, list | JLTIFORME | | 7.7 | DAYS (81) | 109. BIOPSY PERFORMED? |
| EATH | Sequentally, list conditions, if any, leading to cause (C) on Line A. Enter UNDERLYING | 100 ST | | Salaran Salara Salaran Salaran Salara | MONS | YES X NO |
| ISE OF I | ORUSENETHOR CAUSE (disease or injury that Initiated the events (C) resulting in death) LAST | | | | (10) | YES X NO. |
| CAL | 112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEL | YES NO | | | | |
| and the same of | 113. WAS OPERATION PERFORMED FOR ANY CONDITION IN IT | EM 107 OR 1127 (If yes, list type of o | peration and date) | | 113A JF | FEVALE, PREGNANT IN LAST YEAR |
| s!s NOI | 07/15/2013 RESECTION OF TUMO 114 I CERTIFY THAT TOTHE BEST OF MY KNOWLEDGE DEATH COLLIFIED AT THE HOUR DATE, AND PLACE STATED FROM THE CALL SESS STATED. | 🖺 COMO A COMO COMMINES. | CEMIFIER | | البيسا د درور | YES NO UNK |
| PHYSICIAN'S CERTIFICATION | AT THE HOUR DATE AND FLACE STATED PROMITHE CALSES STATED. Decedent Attended Since Decedent Last Seen Alive (A) mm/dd/ccvy (B) mm/dd/ccvy | | | EEE | | w Brandido |
| PH CERT | 04/11/2014 04/17/2014 | 1 33 EF CHMINO | REAL, PALO ACTO, (| CHRISTINA; CA 94301: JRED AT WORK? | TOTAL TOTAL | 2000 454000 7 |
| | MANNER OF DEATH Natural Accident Homic 123 PLACE OF INJURY (e.g., home, construction site, wooded a | de Suicide Pending (nvestigati | Could not be | | 121-INJURY DALE:m | T/dd/ccyy 122.HOUR (24 Hours |
| JSE ONI | 124. DESCRIBE HOW INJURY OCCURRED (Events which results | 1 | Table Tabl | 10.72 (2.72 | 1000 1000 1000 1000 1000 1000 1000 100 | . and the |
| CORONER'S USE ONLY | 125. LOCATION OF INJURY (Street and number, or location, and | 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | 100 100 100 100 100 100 100 100 100 100 | | |
| CORC | | 1 | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | 126 SIGNATURE OF CORONER / DEPUTY CORONER | | DATE mm/dd/ccyy 128 TYPE N | NAME, TITLE OF CORONER / I | DEPUTY CORONER |) www |
| STA REGIS | ATE A B C | D E | *01000100262065 | ING BURUUT HIL HUUU 7° | FAX AUTH.# | CENSUS TRACT |
| | | | 10 10 1 10 10 10 10 10 10 10 10 10 10 10 | 2000 00 00 00 | | 7 (32 73) |

STATE OF CALIFORNIA COUNTY OF SANTA CLARA

CERTIFIED COPY OF VITAL RECORDS

DATE ISSUED

By APR 2 5 2014

* H 2 9 6 0 8 2 2 *

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF PUBLIC HEALTH.

Effective 10/12/2013

Jan A. Colyrus

MARTIN D. FENSTERSHEIB HEALTH OFFICER AND LOCAL REGISTRAR

OF BIRTHS AND DEATHS



COUNTY OF SAN MATEO HEALTH SYSTEM

SAN MATEO, CALIFORNIA

| | 305201400 | | USE BLACK RK | STATE OF CA DHLY / NO ERASURE | LIFORMA S, WATTEOUTS | LATH Drajeradi | ONS | | 3201441 | 33.50 | 1000000 | |
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| 300 | STATE FILE N 1. NAME OF DECEDENT- FIRST NANCY | (Givén) | 2 MIDDLE 3 LAST (Family) | | | COCAL REGISTR | AI ION: NUME | en anna / | | | | |
| CATA | AKA ALSO KNOWN AS - Include | fulaka (FIRST, MIDDLE, LAST) | INOREIN | NOREN YIRCHÖTT 4. DATE OF BIRTH: MY/040/DOYY 5. AGE YA. | | | IF UNDER ONE YEAR | FUNDER | Z4 HOURS 6. SE | <u></u> | | |
| SONAL | | Transfer of the second | ineen tu exe | This is a margin of | 12/0 | 1/1945 | :::::::::::::::::::::::::::::::::::::: | 88 | 7. DATE OF DEATH: | | I S. HOUR DAT | 2000 |
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| ă | 17. USUAL OCCUPATION - Type DIRECTOR OF F | NANCE | | 18. KIND OF BUS | INESS OR II | IDUSTRY (* | .q., grocery stor | e, road constructi | on, employment agen | y, atc.) 19 | YEARS IN OCCUE | ATIO |
| | 20. DECEDENT'S RESIDENCE (SI | reet and number, or location) | | | | | r mari | | | | | - |
| USUAL | 21. CITY | 22.00 | UNTY/PROVINCE | 7 10 10 10 | 23. ZIP | | | | Y 25. STATE/FORE | | RY. | |
| - F | SAN CARLOS 26. INFORMANT'S NAME, RELAT | 200 | MATEO | 27, INF DI | 940 | Constitution and action | ********* | 23 Inumber of wild | CALIFOI | | falp) | |
| N. S. | CHARLES YIRCH | April 100 market market market | 29 MIDDLE | 11 (1 | RILLIU | 1.00 | IE, SAN | digity Title | S, CA 94070 |) <u> </u> | | |
| P AND | CHARLES | The second secon | ROBERT | | 4 | YIR | CHOTT | | | ξ _α | | 995 |
| E/SRD INFOR | 31. NAME OF FATHER/PARENT-I | PST | E, | | | NO. | REN | | | | CALIFOR | |
| SPOUS | 35, NAME OF MOTHER/PARENT | FIRST/ | 36, MIDDLE | | 1 | 10,000 | T (BIRTH NAM VTSCHL | | | | GALIFOR | **** |
| 2 5 | 39, DISPOSITION DATE: mm/dd/c | | TION CYPRES | S LAWN | MEMO | RIAL | | | | | - CONTRACTOR | |
| MRECT COSTR | 01/07/2014 41. TYPE OF DISPOSITION(S) | 1370 EL CAMIN | 42 5/6 | NATURE OF EMB | ALMER | | <u> </u> | | FO | \$6. Indeed | ICENSE NUMBER | 177 |
| CAL RE | BU 44. NAME OF PUNERAL ESTABLE | SHMENT FUNERAL HOME | | ARYANN ENSE NUMBER | | | CAL REGISTRA | я | | 17770004 | VIB B867 ATE mm/dd/scyy. | |
| £ 3 | CYPRESS LAWN | FUNERAL HOME | FD1 | 797 | | | ORROW SPECIFY ON | ALL A STREET, COLUMN | THER THAN HOSPE | | /07/2014 | |
| E OF | RESIDENCE | L. sant | | | | P | | DOM | Alum Hom | | Decedent's Home | Other |
| 20 | SAN-MATEO 11 TRILLIUM LANE | | | | | | SAN CARLOS | | | | | |
| | 107: CAUSE OF DEATH | Error the chain of ovents — die as candiac arrosi, respiratory ar | ost, or ventricular floridatio | in without showing | the eliclogy. | DO NOT ABO | BREVIATE | | Time Interval Bet Oncel and Dec | de la como | YES CORTED TO COR | NO |
| *) @F | IMMEDIATE CAUSE M BREAST CANCER METASTATIC TO LIVER; OMENTUM, PERITONEUM PRIVATION OF CONDITION IN CHIEF WALL IN CONTINUE OF | | | | | | 7,5 YR | S NO | | | | |
| · · | Sequentially, list conditions, if any, | // | | | | | | | (en) | X | YES | NO |
| FDEAT | CAUSE (disease or | | | | | | | | (CT) | | JTOPSY PERFORME | |
| AUSEC | Pulyry that strain (f) | | | | | | (m) | 111,05 | D IN DETERMINING CA | NO | | |
| . | 112, OTHER SCHIPPCANT CONDITIONS CONTRIBUTING TO CEATH BUT NOT RESULTING IN THE UNDER-1996 CAUSE GIVEN IN 137 NONE | | | | | | | | | | | |
| 600a. | 113, WAS OPERATION PERFORM | ED FOR ANY CONDITION IN TIEM 10 NTAL NODULE 10/3 | 7 OR 1127 (If yes, fin ty) | pe of operation en | d clete.) | | | | 1 | | E, PREGRANT IN LUST | |
| . Z | 114, I CERTIEY THAT TO THE BEST OF | ANN TO LEGE | 5. SIGNATURE AND IN | | | ****** | | | 118. LICENSE N | | X NO | |
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| CERTI | December 1 See Ann. Dece | | | | | | | | | | | |
| | MANNER OF DEATH NETWORK | EATH OCCURRED AT THE HOUR, DATE, A | Suckie Pa | THE CAUSES STATES noting estigation | D. Could not I datermine | ×0 | YES | NO UNI | | TE mm/dd/cc | yy 122, HOUR 124 | Hours |
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| 13 (3 | 12/A DESCRIBE HOW NULTHY OCCURRED (Events which much of in alway) | | | | | | | | | | | |
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| ∵છ∷ | 126. BIGNATURE OF CORONER | DEPUTY CORONER | AND | 127, DATE mo | v/dd/ccyy | 128. Tr | PE NAME, TIT | LE OF CORONE | TO DEPUTY CORON | 9 | Party Carlos Santas Santas Carlos Carlos Carlos Carlos | - 63 |
| STA | ≯ ⊒ecolacou lono. | | E | 1 and 1 de la constante | ANT. | in this sale | irining Him sept no | AND THE RESERVE | FAX AUTH.# | 70.000 2000 2000 2000 2000 2000 2000 200 | CENSUS TR | ACT |
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| | The TML AND A DESCRIPTION OF THE PROPERTY OF T | | | 1000 1 | | | | 200 | | | | 1.7 |

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA COUNTY OF SAN MATEO

DATE ISSUED

This is a true and exact reproduction of the document officially registered and placed on file in the office of the SAN MATEO COUNTY HEALTH SYSTEM.

Anabel Tingin

SCOTT MORROW, M.D.

000789631*

HEALTH OFFICER AND REGISTRAR This copy not valid unless prepared on engraved border displaying seal and signature of County Health Officer.



EXHIBIT "A"

(37)

An undivided 1/51st 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. 191 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 each year in the Prime "Season" as defined in and in accordance with said Declarations.

A Portion of APN: 1319-30-644-102