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APN: 1420-08-410-004



KAREN ELLISON, RECORDER

RECORDING REQUESTED BY:

Name: FOR THE PEOPLE
Address: 6405-2 S. Virginia Street
City/State/Zip: Reno, NV 89511

WHEN RECORDED MAIL TO GRANTOR I/C/O:

Name: JAMES FARINA
Address: 999 Sunview Drive
City/State/Zip: Carson City, NV 89705

MAIL TAX STATEMENT TO:

Name: JAMES FARINA
Address: 999 Sunview Drive
City/State/Zip: Carson City, NV 89705

HOMESTEAD

Please complete Affirmation Statement below:

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

-OR-

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the personal information of a person or persons as required by law:

(State specific law)

Signature

JAMES FARINA

Print Name

GRANTOR

Title

