

his death and pursuant to the terms of the Trust, GEORGIA A. FULSTONE, became the sole Trustee of the Trust.

4. Title to the subject property is now held as follows:

“GEORGIA A. FULSTONE, Trustee of the FULSTONE FAMILY 1987 TRUST DATED SEPTEMBER 15, 1987, as amended”

I declare under penalty of perjury under the laws of the State of Nevada that the foregoing is true and correct.

Further your affiant sayeth naught.

DATED: This 21 day of February, 2018.

By: Georgia A. Fulstone
GEORGIA A. FULSTONE, Trustee

STATE OF NEVADA)
 : ss.
COUNTY OF WASHOE)

On this 21 day of February, 2018, personally appeared before me, a notary public, GEORGIA A. FULSTONE, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in her capacity, and that by her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Courtney Edwards
NOTARY PUBLIC

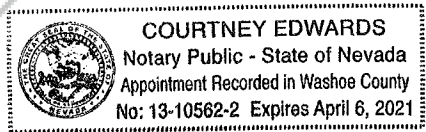


EXHIBIT "A"
DEATH CERTIFICATE

COPY

STATE OF NEVADA

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES

**DIVISION OF HEALTH
VITAL STATISTICS**

CERTIFICATE OF DEATH

2013014085

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) Richard Nelson FULSTONE		2. DATE OF DEATH (Mo/Day/Year) August 07, 2013		3a. COUNTY OF DEATH Lyon	
3b. CITY, TOWN, OR LOCATION OF DEATH Smith		3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street and number) 2220 Hwy 208		3e. if Hosp. or Inst. indicate DOA,OP/Emer. Rm. Inpatient(Specify) Home	
4. SEX Male		5. RACE White (Specify)		6. Hispanic Origin? Specify No - Non-Hispanic	
7a. AGE-Last birthday (Years) 85		7b. UNDER 1 YEAR MOS		7c. UNDER 1 DAY HOURS	
8. DATE OF BIRTH (Mo/Day/Yr) October 03, 1927		9a. STATE OF BIRTH (if not U.S.A. name country) California		9b. CITIZEN OF WHAT COUNTRY United States	
10. EDUCATION 16		11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Married		12. SURVIVING SPOUSE (if wife, give maiden name) Georgia AMES	
13. SOCIAL SECURITY NUMBER 3095		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even If Retired) Rancher		14b. KIND OF BUSINESS OR INDUSTRY Cattle Ranching	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Lyon		15c. CITY, TOWN OR LOCATION Smith	
15d. STREET AND NUMBER 2220 Hwy 208		15e. INSIDE CITY LIMITS (Specify Yes or No) No		16. FATHER/PARENT - NAME (First Middle Last Suffix) Fred Moline FULSTONE	
17. MOTHER/PARENT - NAME (First Middle Last Suffix) Mary Ruth HILL		18a. INFORMANT - NAME (Type or Print) Georgia FULSTONE		18b. MAILING ADDRESS (Street or R.F.D. No; City or Town, State, Zip) P.O. Box 61 Smith, Nevada 89430	
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME La Paloma Reno		19c. LOCATION City or Town State Reno Nevada	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) JAMES FRIZZELL SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE 785		20c. NAME AND ADDRESS OF FACILITY Simple Cremation Reno 1547 South Virginia St, Ste 2 Reno NV 89503	
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) ROBIN LEE TITUS M.D. 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 20, 2013		21c. HOUR OF DEATH 20:00		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) Robin Lee Titus M.D. P.O. Box 377 Wellington, NV 89444				23b. LICENSE NUMBER 4617	
24a. REGISTRAR (Signature) BIANCA GALEANO SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) August 28, 2013		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).)					
PART I				Interval between onset and death	
(a) Respiratory Arrest				Minutes	
(b) Generalized Debility				4 Month	
(c) Parkinsons Disease				8 Years	
(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 1.				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

490767

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.

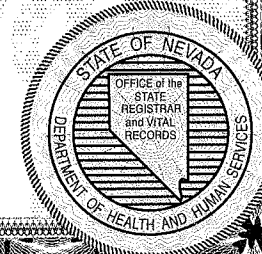
DATE ISSUED:

09/03/2013

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

R. D. White
STATE REGISTRAR
SIGNATURE AUTHENTICATED

VRS-Rev-20120523a



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

EXHIBIT "B"
Legal Description – APN: 1418-03-711-003

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

Lot 61, in Block D, as shown on the map of GLENBROOK UNIT 3-B, filed for record June 13, 1980, as Document No. 45299, in Book 680 of maps, at Page 1269, and amendment thereto recorded March 3, 1981, in Book 381 of Official Records at Page 117, Document No. 53983, Douglas County, Nevada.