DOUGLAS COUNTY, NV

RPTT:\$115.05 Rec:\$35.00

2018-912004

\$150.05 Pgs=5

03/23/2018 03:02 PM

WHITE ROCK GROUP, LLC

KAREN ELLISON, RECORDER

Contract No.: 000571200724
Number of Points Purchased:181,000
Annual Ownership
APN Parcel No.:1318-15-819-001 PTN
Mail Tax Bills To: Wyndham Vacation Resorts, Inc.
6277 Sea Harbor Drive, Orlando, FL 32821
Recording requested by: Lawyers Title of Nevada, Inc.
After recording, mail to:
Wyndham Vacation Resorts, Inc., Title Services

6277 Sea Harbor Drive, Orlando, FL 32821

GRANT, BARGAIN, SALE DEED Fairfield Tahoe at South Shore

FOR VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Guillermo Landeros and Jenny Moreno as Joint Tenants with Right of Sur, whose address is PO BOX 12457, ZEPHYR COVE, NV 89448, hereinafter referred to as the "Grantor(s)" do hereby grant, bargain, sell and convey unto Wyndham Vacation Resorts, Inc., a Delaware corporation, whose principal offices are at 6277 Sea Harbor Drive, Orlando, FL 32821, hereinafter referred to as the "Grantee", the following described real property situated in Douglas County, Nevada, to wit:

A 181,000/90,245,000 undivided fee simple interest as tenants in common in Units 9101, 9102, 9103, 9104, 9201, 9203 and 9204 in South Shore Condominium ("Property"), located at 180 Elks Point Road in Zephyr Cove, Nevada 89449, according to the Final Map #01-026 and Condominium Plat of South Shore filed of record in Book 1202, Page 2181 as Document Number 559872 in Douglas County, Nevada, and subject to all provisions thereof and those contained in that certain Declaration of Condominium - South Shore ("Timeshare Declaration") dated October 21, 2002 and recorded December 5, 2002 in Book 1202, Page 2182 as Instrument Number 559873, and also subject to all the provisions contained in that certain Declaration of Restrictions for Fairfield Tahoe at South Shore and recorded October 28, 2004 in Book 1004, Page 13107 as Instrument Number 628022, Official Records of Douglas County, Nevada, which subjected the Property to a timeshare plan called Fairfield Tahoe at South Shore ("Timeshare Plan").

The property is a/an Annual Ownership Interest as described in the Declaration of Restrictions for Fairfield Tahoe at South Shore and such ownership interest has been allocated 181,000 Points as defined in the Declaration of Restrictions for Fairfield Tahoe at South Shore, which points may be used by the Grantee in Each Resort Year(s).

	Being part of or the sa	Being part of or the same property conveyed to the Grantor(s) by Deed from					
	Grantee	recorded in the official land records for the aforementioned property					
on	4-21e-2012.	as Instrument No. 1/2-6865 and being further identified in Grantce's					
reci		ed under Contract Number 000571200724					

To have and to hold all and singular, the premises described in this Deed, together with appurtenances, to the Grantee and to the Grantee's proper use and benefit forever. Authority is hereby given from each Grantor to Grantee or a designee of Grantee to execute any and all instruments necessary to effect the recordation of this Deed, including, by way of illustration, declaration of property value, affidavit of consideration, seller's tax declaration and correction of clerical errors.

SUBJECT TO: 1. Any and all rights of way, reservations, restrictions, easements, mineral exceptions and reservations, and conditions of record; 2. The covenants, conditions, restrictions, easements, reservations and liens set forth in the Declaration of Restrictions for Fairfield Tahoe at South Shore, and any supplements and

Contract: 000571200724 DB

amendments thereto; 3. All matters set forth on the above-referenced plat of record, and any supplements and amendments thereto.

Title to the Property is herein transferred with all tenements, hereditaments and appurtenances thereunto belonging or appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

DATED this 11/20/2017.
Grantor: GUILLERMO LANDEROS
ACKNOWLEDGEMENT
ACKNOWLEDGEWEN)
STATE OF) ss.
COUNTY OF)
On this theday of, 20 before me, the undersigned, a Notary
Public, within and for the County of , State of
commissioned qualified, and acting to me appeared in person GUILLERMO LANDEROS, to me
personally well known as the person(s) whose name(s) appear upon the within and foregoing deed of
conveyance as the grantor and stated that they had executed the same for the consideration and purposes
therein mentioned and set forth, and I do hereby so certify.
IN TESTIMONY WHEREOF, I have hereunto set my hand and official seal as such Notary
Public at the County and State aforesaid on this day of, 20
Signature
Print Name:
Notary Public
My Commission Expires:

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California	_ }					
County of LOS angeles	_}					
On 12 1 2017 before me,	Maritze Horen o Notary public					
personally appeared 60iller	mo Landeros,					
	sfactory evidence to be the person(s) whose n instrument and acknowledged to me that					
he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of						
which the person(s) acted, executed t						
the foregoing paragraph is true and co	RY under the laws of the State of California that orrect.					
	MARITZA MORENO					
WITNESS my hand and official seal.	Commission No. 2154806 & NOTARY PUBLIC-CALIFORNIA CLOS ANGELES COUNTY					
Notary Public Signature (My Comm. Expres MAY 26, 2020 (Notary Public Seal)					
Notary Publicoignature	Notary Public Sear)					
ADDITIONAL OPTIONAL INFORMAT	This joint complete that the conforma section regarding house, we are					
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary					
Volunitary transfer (Title or description of attached document)	law. • State and County information must be the State and County where the document					
(Title or description of attached document continued)	 signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. 					
Number of Pages 3 Document Date 20 2011	The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of					
CAPACITY CLAIMED BY THE SIGNER	notarization. • Indicate the correct singular or plural forms by crossing off incorrect forms (i.e.					
✓ Individual (s) ☐ Corporate Officer	he/she/they; is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. • The notary seal impression must be clear and photographically reproducible.					
(Title)	Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.					
☐ Partner(s) ☐ Attorney-in-Fact	Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this					
☐ Trustee(s) ☐ Other	acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date.					
2015 Version www NotaryClasses.com 800-873-9865	 Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary). Securely attach this document to the signed document with a staple. 					
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Contract: 000571200724 DB

		A	CKNOWLED	GEMENT	
STATE OF)	>			
COUNTY OF)) ss.	_	_ \	
On this the da	ay of		, 20	before me, the u	indersigned, a Notary
Public, within and for the Cou	nty of	//		, State of	
commissioned qualified, and a		e appeared in	person JENN	YY MORENO,	to me personally well
known as the person(s) whose	name(s) a	ppear upon the	within and	foregoing deed	of conveyance as the
grantor and stated that they ha	d executed	the same for	the consider	ation and purpo	ses therein mentioned
and set forth, and I do hereby s	so certify.	,	/ /		
				Y /	
IN TESTIMONY WH			o set my har	nd and official se	eal as such Notary
Public at the County and State	aforesaid	on this	day of		, 20
Signature: Print Name: Notary Public My Commission Expires:					

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California	
County of LOS angoles	
On 12 7 1207 before me,	Maritza Morren O (Here insert name and life of the officer)
name(s) is/are subscribed to the within he/she/they executed the same in his/h	factory evidence to be the person(s) whose instrument and acknowledged to me that ner/their authorized capacity(ies), and that by nent the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY the foregoing paragraph is true and co	Y under the laws of the State of California that rrect.
WITNESS my hand and official seal. Notary Public Signature (N	MARITZA MORENO Commission No. 2154806 NOTARY PUBLIC-CALIFORNIA LOS ANGELES COUNTY My Comm. Expires MAY 26. 2020
ADDITIONAL OPTIONAL INFORMATION DESCRIPTION OF THE ATTACHED DOCUMENT Voluntary transfer (Title or description of attached document) (Title or description of attached document continued) Number of Pages 3 Document Date 1/20 2017	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law. State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title) Partner(s) Attorney-in-Fact Trustee(s) Other	notarization. Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they-, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a comparate officer indicate the tills (i.e. CEO, CEO, Secretary).

· Securely attach this document to the signed document with a staple.

2015 Version www NotaryClasses.com 800-873-9865

STATE OF NEVADA DECLARATION OF VALUE

DEC	LAKA HON OF	VALUE				\ \
1.	Assessor Parcel Nu a) 1318-15-819-001 PT b) c) d)					1
2.	c) Condo/Twnhse de) Apt. Bldg f)	o)	Approx.	t/Instrur	Page:	L USE ONLY
3.	Total Value/Sales Pr Deed in Lieu of Fored Transfer Tax Value: Real Property Transfe	closure Only (valuer er Tax Due:	e of prop	erty)	\$ <u>29,449.00</u> \$ \$ <u>29,449.00</u> \$ <u>115.05</u>	
4.	If Exemption Claimea) Transfer Tax Exeb) Explain Reason for	mption, per NRS or Exemption:	1	1		
informathe informathe information in the informatio	Partial Interest: Perce The undersigned deception and NRS 375 ation and belief, and commation provided he dexemption, or other tax due plus interest are jointly and severally	clares and acknown of the classification of a	owledges, formation by documore, the padditional Pursuant	unde provid menta parties tax du	ded is correct to tion if called upo agree that disa ue, may result in RS 375.030, the	the best of the in to substantial allowance of ar a penalty of 10°
Signat Signat		DER	Q/		pacity <u>Agent for</u> pacity <u>Agent for</u>	
SELLE	R (GRANTOR) INFOR	RMATION	B	UYER	(GRANTEE) INF	ORMATION
Print Na Address City: State:		T .	Print Name Address: City: State:	6	(REQUIRED) Wyndham Vacation 3277 Sea Harbor Dri Orlando Zip: 32821	•
	ANY/PERSON REQUE		<u>DING</u>			
	(REQUIRED IF NOT THE SELLER ROCK TITLE, LLC	OR BUYER)	Esci	row N	o.: <u>00057120072</u>	24
2907 E	. Joyce Blvd, Suite 2	/			fficer:	
-ayette	eville, AR 72703					

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED)