

WHEN RECORDED MAIL TO:

Davis Family Trust
761 Hornet Drive
Gardnerville, NV 89460

The undersigned hereby affirms that this document submitted for recording includes a death certificate which contains a social security number as required by NRS 440.380(1)(a).

SPACE ABOVE FOR RECORDER'S USE ONLY

Escrow No. 01801942DKD

APN No.: 1220-03-210-017

AFFIDAVIT – DEATH OF TRUSTEE – SUCCESSION OF SUCCESSOR TRUSTEE

State of Nevada }
County of Douglas }

Randall K. Davis, Trustee and Richard N. Davis, Trustee, being duly sworn, deposes and says:

1. Newell P. Davis, the decedent mentioned in attached copy of Certificate of Death, is the same person as Newell P. Davis named as one of the trustee(s) in that certain Grant, Bargain, Sale Deed dated 02/10/2010, executed by U.S. Bank National Association, as Successor Trustee, to Bank of America, National Association as successor by merger to LaSalle Bank National Association, as Trustee for Ownit Mortgage Loan Trust, Ownit Mortgage Loan Asset-Backed Certificates, Series 2006-4 to Richard N. Davis and Randall K. Davis and Newell P. Davis, Trustees of The Newell and Adele Davis Family Trust, Dated September 29, 2004, recorded on 02/16/2010 as instrument number 758849, official records of Douglas County, Nevada, covering the following described property:

See Exhibit "A" attached hereto and by reference made a part hereof for complete legal description.

2. That I, Richard N. Davis and Randall K. Davis, am named within the aforementioned trust as successor trustee;
3. That I hereby consent to act as successor trustee of the aforementioned trust and do hereby assume the powers and duties as successor trustee of such trust;
4. That this Affidavit is made for the protection and benefit of all persons hereafter acquiring an interest in or dealing with the above referenced property.

Dated: 5/8/18

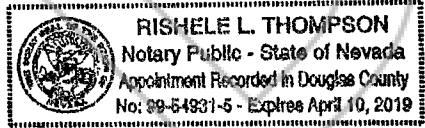
[Signature]
Richard N. Davis, Successor Co-Trustee

[Signature]
Randy K. Davis, Successor Co-Trustee

STATE OF NEVADA }
COUNTY OF DOUGLAS } SS:

This instrument was acknowledged before me on 5/8/18
by ~~Richard N. Davis, Successor Co-Trustee and Randall K. Davis, Successor Co-Trustee~~ Randy K Davis Rt

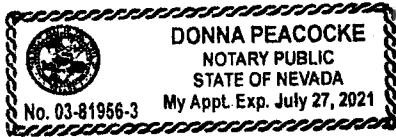
[Signature]
NOTARY PUBLIC



NEVADA INDIVIDUAL ACKNOWLEDGMENT
NRS 240.166

State of Nevada }
County of Douglas } ss.

This instrument was acknowledged before me
on 5-9-18 by
Date



Richard N. Davis (.)
Name of Signer No. 1

(and

_____))
Name of Signer No. 2 (if any)

Donna Peacocke

Signature of Notary Public

Place Notary Seal and/or Stamp Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Affidavit - Death of Trustee

Document Date: 5-8-18 Number of Pages: 2

Signer(s) Other Than Named Above: Randall K Davis

CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH VITAL STATISTICS

CERTIFICATE OF DEATH

2013005227

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 AVE AROSE TO IMMEDIATE CAUSE -> STATING THE UNDERLYING CAUSE LAST

1a. DECEASED-NAME (FIRST,MIDDLE, LAST, SUFFIX) Newell Pierce DAVIS		2. DATE OF DEATH (Mo/Day/Year) March 18, 2013		3a. COUNTY OF DEATH Douglas	
3b. CITY, TOWN, OR LOCATION OF DEATH Gardnerville		3c. HOSPITAL OR OTHER INSTITUTION -Name (if not either, give street and number) 1405 Honey Locust		3e. If Hosp. or Inst. Indicate DOA, OP/Emer. Rm. Inpatient (Specify) Home	
5. RACE White		7a. AGE-Last birthday (Years) 92		7b. UNDER 1 YEAR MOS DAYS	
9a. STATE OF BIRTH (if not U.S.A., name country) Utah		9b. CITIZEN OF WHAT COUNTRY United States		11. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED (Specify) Widowed	
13. SOCIAL SECURITY NUMBER ██████████-7796		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of Working Life, Even If Retired) Self Employed		14b. KIND OF BUSINESS OR INDUSTRY Travel Agency	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Douglas		15c. CITY, TOWN OR LOCATION Gardnerville	
15d. STREET AND NUMBER 1405 Honey Locust		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes		8. DATE OF BIRTH (Mo/Day/Yr) January 01, 1921	
16. FATHER/PARENT - NAME (First-Middle-Last Suffix) Archibald DAVIS			17. MOTHER/PARENT - NAME (First-Middle-Last Suffix) Gladys Jacobina MCMULLIN		
18a. INFORMANT- NAME (Type or Print) Randy DAVIS			18b. MAILING ADDRESS (Street or R.F.D. No., City or Town, State, Zip) 761 Horriet Dr. Gardnerville, Nevada 89460		
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Burial		19b. CEMETERY OR CREMATORY - NAME Santa Clara, Utah		19c. LOCATION - City or Town State Santa Clara Utah 84765	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) CURT KOESTLER		20b. FUNERAL DIRECTOR LICENSE 823		20c. NAME AND ADDRESS OF FACILITY Walton's Funerals and Cremations 1521 Church Street Gardnerville NV 89410	
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) NITA SCHWARTZ M.D. SIGNATURE AUTHENTICATED					
21b. DATE SIGNED (Mo/Day/Yr) March 27, 2013		21c. HOUR OF DEATH 19:48		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)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22b. DATE SIGNED (Mo/Day/Yr)		22c. HOUR OF DEATH	
23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Nita Schwartz M.D. 710 W. Washington St. Carson City, NV 89703		23b. LICENSE NUMBER 9114		22d. PRONOUNCED DEAD (Mo/Day/Yr)	
24a. REGISTRAR (Signature) NICOLE SHORE SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) April 01, 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) Cardiopulmonary Arrest					
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(b) Renal Failure					
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(c) Bladder Outlet Obstruction					
DUE TO, OR AS A CONSEQUENCE OF:				Interval between onset and death	
(d) Prostatic Hypertrophy					
PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1. Dementia, Alzheimers					
26. ACC., SUICIDE, HOMIC., UNDET. OR PENDING INVEST. (Specify)		26a. DATE OF INJURY (Mo/Day/Yr)		26b. HOUR OF INJURY	
28a. 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	
				28d. DESCRIBE HOW INJURY OCCURRED	

STATE REGISTRAR



475697

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.

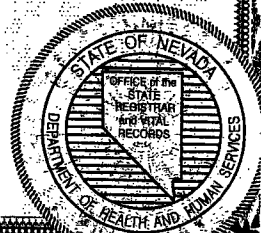
DATE ISSUED:

04/03/2013

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

STATE REGISTRAR
Randy Whelan
SIGNATURE AUTHENTICATED

VRS-Rev-20120523a



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

CERTIFICATE OF DEATH

State File Number: 2006012294

Mary Adele Squires Davis

DECEDENT INFORMATION

Date of Death: September 29, 2006
 City of Death: Ivins
 Age: 88
 Place of Birth: Salt Lake City, Utah
 Armed Services: No
 Spouse's Name: Newell P Davis
 Industry/Business: Own Home - Travel
 Residence: Ivins, Utah
 Mother's Name: Chloe Young
 Facility or Address: 424 East 400 South

Time of Death: 14:30
 County of Death: Washington
 Date of Birth: August 13, 1918
 Sex: Female
 Marital Status: Married
 Usual Occupation: Wife-Mother - Travel Agent
 Education: Bachelor's Degree
 Father's Name: Les Squires
 Facility Type: Home

INFORMANT INFORMATION

Name: Newell P Davis Relationship: Husband
 Mailing Address: 424 East 400 South, Ivins, Utah 84738

DISPOSITION INFORMATION

Method of Disposition: Burial Date of Disposition: October 11, 2006
 Place of Disposition: Santa Clara City Cemetery, Santa Clara, Utah

FUNERAL HOME INFORMATION

Funeral Home: Metcalf Mortuary
 Address: 288 West St George Blvd, St George, Utah 84770
 Funeral Director: Michael T Furner

MEDICAL CERTIFICATION

Certifying Physician: Daniel B Madsen MD, 1490 E. Foremaster Dr. #210, St George, Utah 84790

CAUSE OF DEATH

Pulmonary Fibrosis
 Atrial Fib, Osteoarthritis
 Tobacco Use: Unknown if User
 Medical Examiner Contacted: No Autopsy Performed: No Manner of Death: Natural

DATE ISSUED: October 22, 2007

AMENDMENT HISTORY

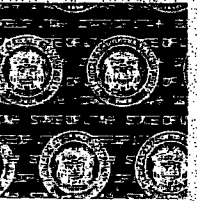
10/10/2006 Disposition Cemetery from Santa Clara City Cemetery to Santa Clara City Cemetery

This is an exact reproduction of the document registered in the State Office of Vital Statistics. Security features of this official document include: Intaglio Border, V & R images in top cycloids, ultra violet fibers and hologram image of a hawk over the word valid. This document displays the date, seal and signature of the State Registrar of Vital Statistics. Updated Utah State Seal replaces hawk over valid for authenticity.

Barry E Nangle
 Barry E. Nangle
 State Registrar



UTAH DEPARTMENT OF HEALTH
 Office of Vital Records & Statistics
 Salt Lake City, Utah



Order No.: 01801942-DKD

EXHIBIT A

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

Lot 15, Block D, as set forth on Final Subdivision Map LDA 01-047, Planned Unit Development for ARBOR GARDENS, PHASE 1, filed for record in the office of the County Recorder of Douglas County, State of Nevada on October 18, 2002, Book 1002, Page 8115, as Document No. 555262, and by Certificate of Amendment recorded February 20, 2003, in Book 0203, at Page 7818, as Document No. 567590, and September 28, 2004 in Book 904, at Page 11209, as Document No. 625221.

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