

DOUGLAS COUNTY, NV

2018-921427

Rec:\$35.00

\$35.00

Pgs=4

10/29/2018 09:20 AM

ETRCO

KAREN ELLISON, RECORDER

APN# : 1221-19-002-029

Recording Requested By:

Western Title Company, Inc.

Escrow No.: 099936-TEA

When Recorded Mail To:

Sammy Ventures, LLC

9518 Winsome Ln

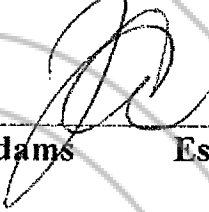
Houston, TX

77063

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons.

(Per NRS 239B.030)

Signature


Traci Adams

Escrow Officer

Substitution of Trustee and Deed of Full Reconveyance


This page added to provide additional information required by NRS 111.312
(additional recording fee applies)

SUBSTITUTION OF TRUSTEE AND DEED OF FULL RECONVEYANCE

The undersigned Beneficiaries, Lemuel W. Thompson and Jennie L. Thompson as Co Trustees for the Bill & Jennie Thompson Family Trust dated March 22, 1998 in and under the provisions of that certain Deed of Trust executed by Sammy Ventures, LLC, Trustors, to Northern Nevada Title Company, as Trustee for Lemuel W. Thompson and Jennie L. Thompson as Co Trustees for the Bill & Jennie Thompson Family Trust dated March 22, 1998, Beneficiaries, dated May 18, 2015 and recorded on May 21, 2015 as document number 2015-862417 of Official Records in the office of the Recorder of Douglas, State of Nevada, do(es) in accordance with the provisions of said Deed of Trust, hereby give notice of the Substitution and Appointment of Lemuel W. Thompson and Jennie L. Thompson as Co Trustees for the Bill & Jennie Thompson Family Trust dated March 22, 1998 in place and instead of Northern Nevada Title Company the Trustee above named, and do(es) hereby vest in said substituted Trustee, all the rights, title, estate, power, duty and trusts conferred by said Deed of Trust upon the Trustee therein named. And whereas the indebtedness secured, to be paid by the Deed of Trust above mentioned has been fully paid and/or satisfied.

NOW THEREFORE, Lemuel W. Thompson and Jennie L. Thompson as Co Trustees for the Bill & Jennie Thompson Family Trust dated March 22, 1998, substituted Trustee, does hereby GRANT AND RECONVEY unto the parties entitled thereto without warranty, all the estate and interest derived to the said Trustee under said Deed of Trust in the lands therein described, situated in the City of Gardnerville County of Douglas, State of Nevada. Reference being hereby made specifically to said Deed of Trust and the record thereof for a particular description of said lands.

Dated: OCT 12, 2018


Lemuel W. Thompson


Jennie L. Thompson

STATE OF NEVADA ²⁰ CALIF

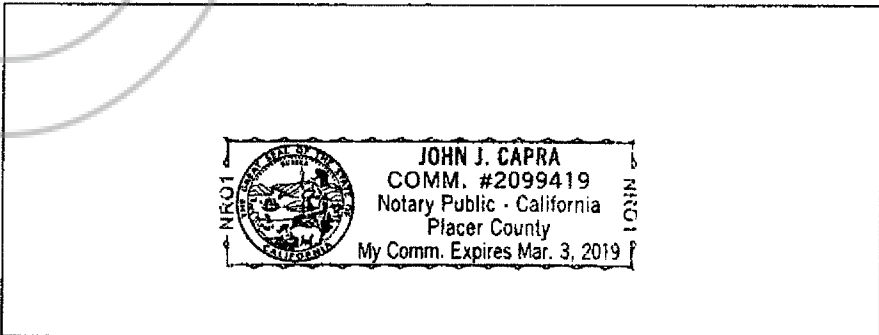
COUNTY OF PLACER

} ss

This instrument was acknowledged before me on OCT 12, 2018

by LEMUEL W THOMPSON
AND JENNIE L THOMPSON


Notary Public



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 PLACER }

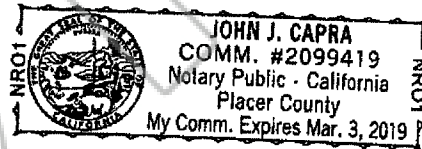
On OCT 12, 2018 before me, JOHN J. CAPRA Notary Public
(Here insert name and title of the officer)

personally appeared LEMUEL W THOMPSON + JENNIE L THOMPSON who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within 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 the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

[Signature]
Notary Public Signature (Notary Public Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

SUBSTITUTION OF TRUSTEE
(Title or description of attached document)

DEED OF FULL RECONVEYANCE
(Title or description of attached document continued)

Number of Pages _____ Document Date _____

INSTRUCTIONS FOR COMPLETING THIS FORM

This form complies with current California statutes regarding notary wording and, 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.

- o State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- o Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- o 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).
- o Print the name(s) of document signer(s) who personally appear at the time of notarization.
- o 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.
- o 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.
- o Signature of the notary public must match the signature on file with the office of the county clerk.
 - o Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - o Indicate title or type of attached document, number of pages and date.
 - o Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- o Securely attach this document to the signed document with a staple.

CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
- Corporate Officer

(Title)
- Partner(s)
- Attorney-in-Fact
- Trustee(s)
- Other _____