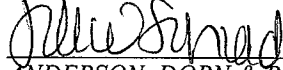


This document includes a certified death certificate as required by NRS 40.525(5) which contains a social security number as required by NRS 440.380(1)(a).



ANDERSON, DORN & RADER, LTD.

APN: 1420-28-601-008

RECORDING REQUESTED BY:

Bryce L. Rader, Esq.
Anderson, Dorn & Rader, Ltd.
500 Damonte Ranch Parkway, Suite 860
Reno, Nevada 89521

AFTER RECORDING MAIL TO:

Anderson, Dorn & Rader, Ltd.
500 Damonte Ranch Parkway, Suite 860
Reno, Nevada 89521

MAIL TAX STATEMENT TO:

Frances E. Bolaris, Trustee
1338 Denney Lane
Minden, NV 89423

AFFIDAVIT OF DEATH OF TRUSTEE

I, FRANCES E. BOLARIS, the undersigned Trustee, affirm under penalty of perjury under the laws of the State of Nevada that the following is true and correct:

(1) By instrument dated November 1, 2004, JOHN G. BOLARIS and I executed the BOLARIS LIVING TRUST (the "Trust").

(2) JOHN G. BOLARIS deceased on August 25, 2018, at Reno, Nevada, a resident of Douglas County, Nevada. Attached hereto is a certified copy of the death certificate of said JOHN G. BOLARIS.

(3) Said trust appointed me to serve as sole Trustee upon the death of JOHN G. BOLARIS.

(4) Pursuant to the terms of the Trust, I have assumed the responsibilities of sole Trustee.

(5) The following described real property is part of the Trust estate: See Exhibit "A" attached.

(6) I am authorized under the terms of the Trust and applicable provisions of the Nevada Revised Statutes to act as sole Trustee with respect to the Trust's interest in the described property.

(7) No other person has a right to the interest of the Trust in the described property.

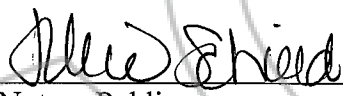
(8) The described property shall be transferred to me as sole Trustee.

Executed in the County of Washoe, State of Nevada, on January 15, 2019.


FRANCES E. BOLARIS, Trustee

STATE OF NEVADA)
) ss:
COUNTY OF WASHOE)

Signed and sworn to (or affirmed) before me on January 15, 2019, by FRANCES E. BOLARIS, Trustee.


Notary Public


 JULIE SCHIELD
Notary Public - State of Nevada
Appointment Recorded in Washoe County
No: 99-4151-2 - Expires June 1, 2019

EXHIBIT "A"

PARCEL 1:

A boundary line adjustment between Parcels 2, 3 and 4 as shown on Parcel Map for Lawrence P. and Ilo Jean Nepsund, filed for record in Book 1291 at page 2891 as Document number 267368, Official Records of Douglas County, Nevada and also known as assessors parcel numbers 21-050-46, 21-050-47 and 21-050-48 respectively and more particularly described as follows:

All that certain lot, piece, parcel or portion of land situate, lying and being within the Southwest 1/4 of the Northeast 1/4 of Section 28, Township 14 North, Range 20 East, M.D.M., Douglas County, Nevada and more particularly described as follows:

All that portion of aforesaid Parcels 2, 3 and 4 described as follows:

Commencing at the Northwest corner of Parcel 1 as shown on the aforesaid Parcel Map; thence along the North line of said Parcel 1 North $89^{\circ}51'04''$ East a distance of 265.89 feet to the TRUE POINT OF BEGINNING; thence continuing along the North line of Parcel 2 and Parcel 3 North $89^{\circ}51'04''$ East a distance of 87.45; thence leaving said North line South $00^{\circ}07'37''$ West a distance of 119.71 feet; thence North $89^{\circ}46'11''$ East a distance of 71.33 feet; thence South $00^{\circ}08'51''$ West a distance of 211.09 feet to a point on the South line of aforesaid Parcel 4; thence along the South line of Parcels 4 and 2 South $89^{\circ}48'10''$ West a distance of 158.84 feet; thence North $00^{\circ}08'55''$ East a distance of 330.84 feet to the TRUE POINT OF BEGINNING.

Subject to and together with a Private road right-of-way for Denney Lane as shown on aforesaid parcel map.

The Basis of Bearing of this description is the Westerly right-of-way of Santa Inez Drive, which bears North $00^{\circ}08'51''$ East as shown on the Record of Survey for Andrew Hoffer, filed for record in Book 979 at page 1818 as Document number 36993, Official Records of Douglas County, Nevada.

Reference is made to Record of Survey supporting a Boundary Line Adjustment for TALBERT L. DENNEY and filed for record with the Douglas County Recorder on January 19, 1995 as Document No. 354621, Official Records of Douglas County, Nevada.

ASSESSOR'S PARCEL NO. 1420-28-601-008

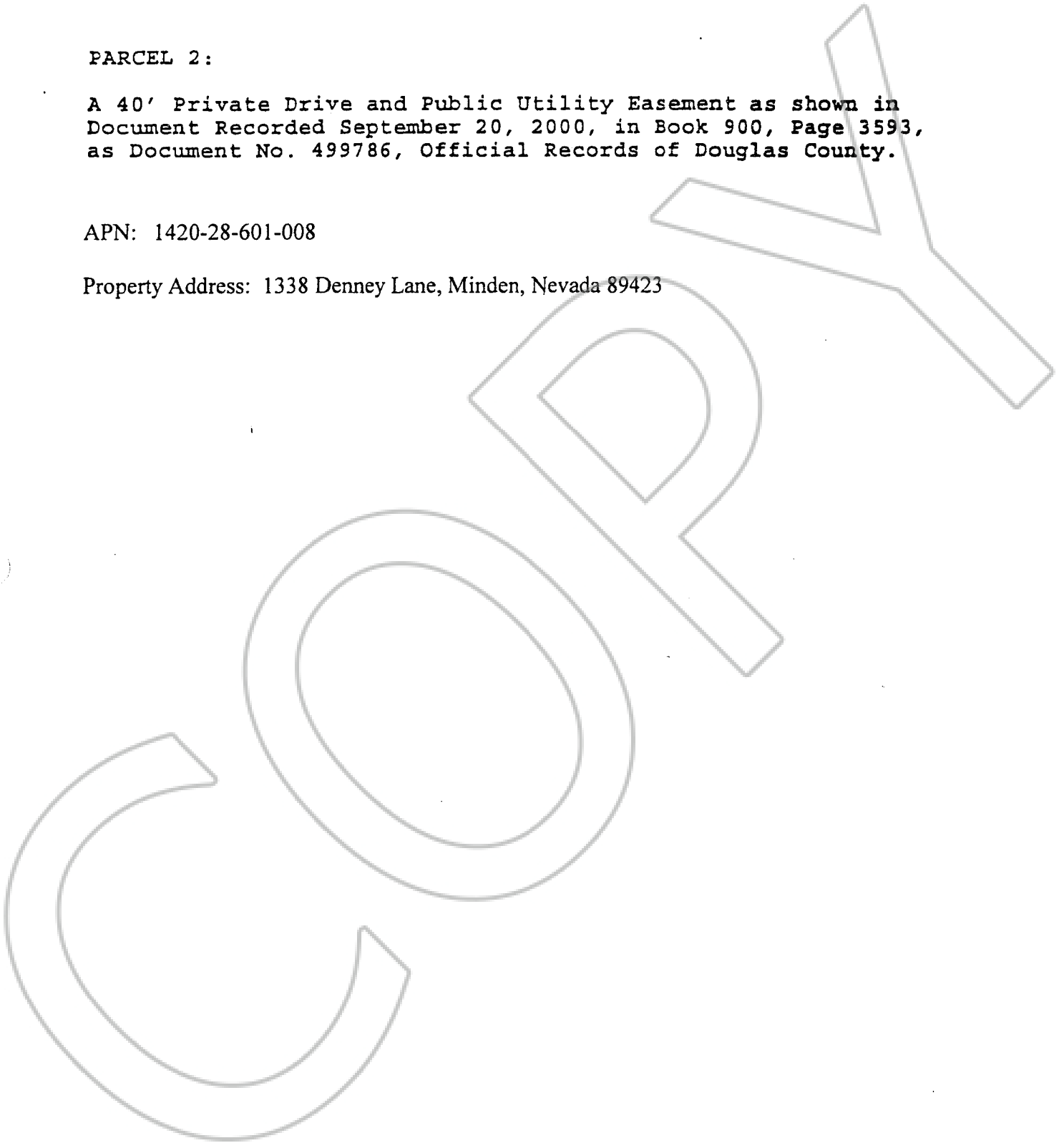
"IN COMPLIANCE WITH NEVADA REVISED STATUE 111.312, THE HEREIN ABOVE LEGAL DESCRIPTION WAS TAKEN FROM INSTRUMENT RECORDED MAY 15, 2000, BOOK 0500, PAGE 3246, AS FILE NO. 491995, RECORDED IN THE OFFICIAL RECORDS OF DOUGLAS COUNTY, STATE OF NEVADA."

PARCEL 2:

A 40' Private Drive and Public Utility Easement as shown in Document Recorded September 20, 2000, in Book 900, Page 3593, as Document No. 499786, Official Records of Douglas County.

APN: 1420-28-601-008

Property Address: 1338 Denney Lane, Minden, Nevada 89423



STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
VITAL STATISTICS

CASE FILE NO. 4037157

CERTIFICATE OF DEATH

2018016487
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) John Gust BOLARIS		2. DATE OF DEATH (Mo/Day/Year) August 25, 2018		3a. COUNTY OF DEATH Washoe	
3b. CITY, TOWN, OR LOCATION OF DEATH Reno		3c. HOSPITAL OR OTHER INSTITUTION -Name (If not either, give street and Inpatient)(Specify) Renown Regional Medical Center Inpatient		4. SEX Male	
5. RACE (Specify) White		6. Hispanic Origin? Specify No - Non-Hispanic		7a. AGE-Last birthday (Years) 74	
9a. STATE OF BIRTH (If not US/CA, name country) Utah		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 18	
11. MARITAL STATUS (Specify) Married		12. SURVIVING SPOUSE'S NAME (Last name prior to first marriage) Frances HICKS		13. DATE OF BIRTH (Mo/Day/Yr) July 09, 1944	
13. SOCIAL SECURITY NUMBER 4369		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of) Probation Officer		14b. KIND OF BUSINESS OR INDUSTRY Law Enforcement	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Douglas		15c. CITY, TOWN OR LOCATION Minden	
15d. STREET AND NUMBER 1338 Denney Lane		15e. INSIDE CITY LIMITS (Specify Yes or No) Yes		16. Ever in US Armed Forces? No	
16. FATHER/PARENT - NAME (First Middle Last Suffix) Gust E.BOLARIS			17. MOTHER/PARENT - NAME (First Middle Last Suffix) Mary KALAKIS		
18a. INFORMANT - NAME (Type or Print) Frances BOLARIS		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 1338 Denney Lane Minden Nevada 89423			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Cremation		19b. CEMETERY OR CREMATORY - NAME Walton's Sierra Crematory		19c. LOCATION City or Town State Carson City Nevada 89706	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) CARLEN BLANSETT		20b. FUNERAL DIRECTOR LICENSE NUMBER FD861		20c. NAME AND ADDRESS OF FACILITY Waltons Funerals & Cremations-Chapel of the Valley 1281 N Roop Carson City NV 89706	
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) CHRISTINA COSS APRN			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 28, 2018		21c. HOUR OF DEATH 09:24		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22c. HOUR OF DEATH		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) Christina Coss APRN 1155 Mill St Reno, NV 89502			
23b. LICENSE NUMBER APRN002595		24a. REGISTRAR (Signature) BLAIR J HEDRICK			
24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) August 28, 2018		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					
(a) Acute Respiratory Failure Interval between onset and death:					
(b) Metastatic Adenocarcinoma Of Esophagus Interval between onset and death:					
(c) Unknown Etiology Interval between onset and death:					
(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) No			
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

000734620



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: 8/30/2018

Julie Ketchum
STATE REGISTRAR
SIGNATURE AUTHENTICATED

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

