

RECORDING REQUESTED BY:

Toiyabe Title
6774 S. McCarran Blvd
Reno, NV 89509

WHEN RECORDED RETURN TO:



6774 S. McCarran Blvd.
Suite 102
Reno, NV 89509
APN 1220-16-210-041

DOUGLAS COUNTY, NV

2019-931706

Rec:\$35.00

\$35.00 Pgs=5

07/12/2019 03:41 PM

TOIYABE TITLE

KAREN ELLISON, RECORDER

LETTERS OF CO ADMINISTRATION

Title of Document

RECEIVED

JUL - 3 2019

FILED

1 CASE NO: 19PB-0072

Douglas County
District Court Clerk

2 DEPT NO: II

2019 JUL -3 PM 4:15

ROSE R. WILLIAMS
CLERK

M. BIAGGINI DEPUTY

3
4
5 **IN THE NINTH JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA**

6 **IN AND FOR THE COUNTY OF DOUGLAS**

7
8
9 IN THE MATTER OF THE

10 ESTATE OF DARRELL BRADFORD,

11 Deceased.

12 _____ /
13 **LETTERS OF CO-ADMINISTRATION**

14 STATE OF NEVADA)

: ss.

15 COUNTY OF WASHOE)

16 On the 24th day of June, 2019, the Court entered an Order appointing SOO
17 BRADFORD and IRIE SAKANE as Co-Administrators of the estate of DARRELL
18 BRADFORD.

19 The Order includes full authority for the Co-Administrators to administer the estate
20 pursuant to Independent Administration of Estates Act and that SOO BRADFORD and IRIE
21 SAKANE have exclusive, independent power with regard to all matters concerning this estate
22 and that they shall serve without bond, who having qualified as such, are hereby authorized to
23 act by virtue thereof and have the authority and shall perform the duties of co-administrators.
24

Donald K. Coppa, LTD.

ATTORNEY AT LAW
874 SO. HOLLINGTON AVENUE
RENO, NEVADA, 89503
(775) 733-1666 • FAX: (775) 733-8055

Donald K. Coppa, LTD.
ATTORNEY AT LAW
620 W. ARLINGTON AVENUE
SANTA CLARA, CALIF. 95050
(415) 325-1004 • FAX (415) 325-0055

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26

In testimony whereof, I have officially signed these Letters and affixed hereto
the Seal of the Court, this 3 day of ^{July} ~~June~~, 2019.

*AFFIRMATION: the foregoing document does not contain the social security number
of any individual.*

BOBBIE WILLIAMS, CLERK



By: M. BIAGGINI
DEPUTY CLERK

OFFICIAL OATH

I, SOO BRADFORD do solemnly affirm that I will faithfully perform according to the
law all the duties and obligations of the office of Co-Administrator of the Estate of
DARRELL BRADFORD, Deceased.

By: 
SOO BRADFORD

STATE OF CALIFORNIA)
COUNTY OF Santa Clara SS:

PLEASE SEE CALIFORNIA NOTARY ACKNOWLEDGMENT

OFFICIAL OATH

I, IRIE SAKANE do solemnly affirm that I will faithfully perform according to the law

CALIFORNIA 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 Santa Clara)

On June 27th, 2019 before me, Nichelle Russien, Notary Public
(here insert name and title of the officer)

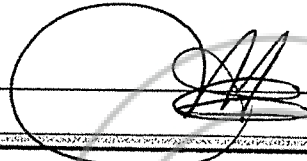
personally appeared Soo Bradford

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



(Seal)

Optional Information

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

Description of Attached Document

The preceding Certificate of Acknowledgment is attached to a document titled/for the purpose of _____

containing 3 pages, and dated June 27th, 2019

Letters of Co-Administration

The signer(s) capacity or authority is/are as:

- Individual(s)
- Attorney-in-Fact
- Corporate Officer(s) _____ Title(s) _____
- Guardian/Conservator
- Partner - Limited/General
- Trustee(s)
- Other: _____

representing: Co-Administration
Name(s) of Person(s) or Entity(ies) Signer is Representing

Additional Information

Method of Signer Identification

Proved to me on the basis of satisfactory evidence:
 Term(s) of Identification credible witness(es)

Notarial event is detailed in notary journal on:
Page # _____ Entry # _____

Notary contact: _____

Other

Additional Signer(s) Signer(s) Thumbprint(s)

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26

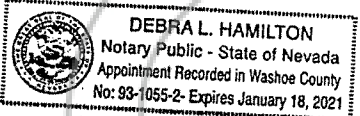
all the duties and obligations of the office of Co-Administrator of the Estate of DARRELL
BRADFORD, Deceased.

By: *Irie Sakane*
IRIE SAKANE

STATE OF NEVADA)
) ss:
COUNTY OF Washoe)

Subscribed and Affirmed to before me
this 3rd day of June, 2019,
IRIE SAKANE.

By: *Debra L. Hamilton*
NOTARY PUBLIC



Donald K. Coppa, LTD.
ATTORNEY AT LAW
520 SOUTH WASHINGTON AVENUE
RENO, NEVADA 89501
(775) 785-1000 • FAX: (775) 785-0055

CERTIFIED COPY
The document to which this certificate is attached is a
full, true and correct copy of the original in file and of
record in my office.
DATE July 3, 2019
BOBBIE R. WILLIAMS Clerk of Court
of the State of Nevada, in and for the County of Douglas,
By: *W. R. Agan* Deputy