

Assessor's Parcel Number:

1420-07-617-031



KAREN ELLISON, RECORDER E03

Prepared By:

Gilbert M. Lopez

After Recording Return to:

Gilbert Moreno Lopez

932 Opalite Dr

Carson City, Nevada 89705

SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

On June 13, 2019 THE GRANTOR(S),

- Lopez Family Trust, Gilbert Moreno Lopez, Trustee
- Lopez Family Trust, Marietta Grace Lopez, Trustee

For and in consideration of: ONE DOLLAR (\$1.00) and/or other good and valuable consideration conveys, releases and quitclaims to the GRANTEE(S):

- Gilbert Moreno Lopez and Marietta Grace Lopez, a married couple, residing at 932 Opalite Dr, Carson City, Douglas County, Nevada 89705

The following described real estate, situated in an unincorporated area in the County of Douglas County, State of Nevada.

Legal Description: See attached *Exhibit A*

Description is as it appears in Document No. 0769715, Official Records, County of Douglas County, State of Nevada.

Grantor does hereby convey, release and quitclaim all of the Grantor's rights, title and interest in and to the above described property and premises to the Grantee(s), and to the Grantee(s) heirs and assigns forever, so that neither Grantor(s) heirs, legal representatives or assigns shall have, claim or demand any rights or title to the property, premises or appurtenances or any part thereof.

Mail Tax Statements To:

Gilbert Moreno Lopez

932 Opalite Dr

Carson City, Nevada 89705

(SIGNATURE PAGE FOLLOWS)

*Correct document 2019 - 930402
and to include second trustee & remove
life estate.*

Grantor Signatures:

DATED 07-29-2019

Gilbert Moreno Lopez

Gilbert Moreno Lopez, Trustee on Behalf of Lopez Family Trust

Grantor Signatures:

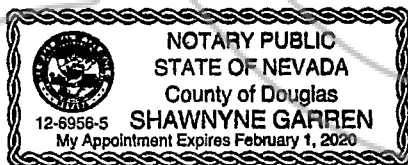
DATED 7/29/2019

Marietta Grace Lopez

Marietta Grace Lopez, Trustee on Behalf of the Lopez Family Trust

STATE OF NEVADA, COUNTY OF DOUGLAS COUNTY, ss:

This instrument was acknowledged before me on the 29 day of July, 2019 by Gilbert Moreno Lopez and Marietta Grace Lopez on behalf of the Lopez Family Trust.



Shawnyne Garren
Notary Public

Notary Public
Title (and Rank)

My commission expires 2/1/20



EXHIBIT A

Legal Description

LOT 16, HIGHLAND ESTATES UNIT NO. 1, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON JULY 26, 1977, AS DOCUMENT NO. 11379.

COPY

STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: _____

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

- 1. Assessor Parcel Number (s)**
- (a) 1420-07-617-031
- (b) _____
- (c) _____
- (d) _____

- 2. Type of Property:**
- a) Vacant Land b) Single Fam Res.
- c) Condo/Twnhse d) 2-4 Plex
- e) Apt. Bldg. f) Comm'l/Ind'l
- g) Agricultural h) Mobile Home
- i) Other

- 3. Total Value/Sales Price of Property:**
- Deed in Lieu of Foreclosure Only (value of property) \$ _____
- Transfer Tax Value: \$ _____
- Real Property Transfer Tax Due: \$ _____

- 4. If Exemption Claimed:**
- a. Transfer Tax Exemption, per NRS 375.090, Section: 3
- b. Explain Reason for Exemption: corrects document 2019-930402 to include second trustee & remove life estate
- 5. Partial Interest: Percentage being transferred:** _____ %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1 % per month.

Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature Marietta Paa Lopez Capacity Trustee

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: LOPEZ FAMILY TRUST

Address: 732 OPALITE DR

City: CARSON CITY

State: NV Zip: 89405

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: MARIETTA & GILBERT

Address: SAME LOPEZ

City: _____

State: _____ Zip: _____

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____

Address: _____

City: _____ State: _____ Zip: _____