

APN# 1318-15-820-001

Recording Requested by:

Name: Michael Calvo and Sheilla Vidal
Address: P.O. Box 12457
City/State/Zip: Zephyr Cove, Nevada 89448

When Recorded Mail to:

Name: Michael Calvo and Sheilla Vidal Family Trust
Address: 65 Ramsgate Way
City/State/Zip: Vallejo, California 94591

Mail Tax Statement to:

Name: Michael Calvo and Sheilla Vidal Family Trust
Address: 65 Ramsgate Way
City/State/Zip: Vallejo, California 94591

(For Recorder's use only)

GRANT, BARGAIN, SALE DEED

(Title of Document)

Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the personal information of any person or persons.
(Per NRS 239B.030)

-OR-

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the personal information of a person or persons as required by law:
(State specific law)

Sheilla Vidal
Signature

Title

SHEILLA VIDAL

Printed Name

This page added to provide additional information required by NRS 111.312 Sections 1-2 and NRS 239B.030 Section 4.

This cover page must be typed or printed in black ink.

(Additional recording fee applies)

APN: 1318-15-820-001

MAIL TAX STATEMENT TO:

Michael Calvo and Sheilla Vidal Family Trust
65 Ramsgate Way
Vallejo, California 94591

GRANT, BARGAIN, SALE DEED

FOR VALUABLE CONSIDERATION, MICHAEL CALVO and SHEILLA VIDAL, Joint Tenants with the Right of Survivorship ("GRANTOR"), do hereby Grant, Bargain Sell and Convey to MICHAEL ANTHONY CALVO and SHEILLA AGUIRRE VIDAL, Settlers and Trustees, or any Successor Trustee of the MICHAEL CALVO AND SHEILLA VIDAL FAMILY TRUST, dated September 29, 2011, and any amendments thereto ("GRANTEE"), all of their interest in the real property located at 180 Elks Point Road, Zephyr Cove, Nevada 89449, Douglas County, Assessor's Parcel Number 1318-15-820-001, and more particularly described as follows:

A 413,000/128,986,500 undivided fee simple interest as tenants in common in Units 10101, 10102, 10103, 10104, 10201, 10202, 10203, 10204, 10301, 10302, 10303, and 10304 in South Shore Condominium ("Property"), located at 180 Elks Point Road in Zephyr Cove, Nevada 89449, according to the Final Map #01-026 and Condominium Plat of South Shore filed of record in Book 1202, Page 2181 as Document Number 559872 in Douglas County, Nevada, and subject to all provisions thereof and those contained in that certain Declaration of Condominium – South Shore ("Timeshare Declaration") dated October 21, 2002 and recorded December 5, 2002 in Book 1202, Page 2182 as Instrument Number 559873, and also subject to all the provisions contained in that certain Declaration of Restrictions for Fairfield Tahoe at South Shore and recorded October 28, 2004 in Book 1004, Page 13107 as Instrument Number 628022, Official Records of Douglas County, Nevada, which subjected the Property to a timeshare plan called Fairfield Tahoe at South Shore ("Timeshare Plan").

Less and except all minerals and mineral rights which mineral and mineral rights are hereby reserved unto the Grantor, its successors and assigns.

The Property is a/an Annual Ownership Interest as described in the Declaration of Restrictions for Fairfield Tahoe at South Shore and such ownership interest has been allocated 413,000 Points as defined in the Declaration of Restrictions for Fairfield Tahoe at South Shore, which points may be used by the Grantee in Each Resort Year(s).

SUBJECT TO:

1. Any and all rights of way, reservations, restrictions, easements, mineral exceptions and reservations, and conditions of

record;

2. The covenants, conditions, restrictions and liens set forth in the Timeshare Declaration and the Declaration of Restrictions for Fairfield Tahoe at South Shore, and any supplements and amendments thereto;

3. Real estate taxes that are currently due and payable and are a lien against the Property; and

4. All matters set forth on the plat of record depicting South Shore Condominium, and any supplements and amendments thereto.

By accepting this deed the Grantee(s) do(es) hereby agree to assume the obligation for the payment of a pro-rata or proportionate share of the real estate taxes for the current year and subsequent years. Further, by accepting this deed the Grantee(s) accept(s) title subject to the restrictions, liens and obligations set forth above and agree(s) to perform the obligations set forth in the Timeshare Declaration and the Declaration of Restrictions for Fairfield Tahoe at South Shore, in accordance with the terms thereof.

APN 1318-15-820-001

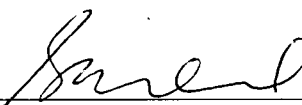
TOGETHER WITH all and tenements, hereditaments and appurtenances, including but not limited to, easements and water rights, if any, thereto belonging or in any manner appertaining, and any reversions, remainders, rents, issues, or profits thereof.

TO HAVE AND TO HOLD, the described property, together with the appurtenances, unto the GRANTEE and GRANTEE's successors and assigns forever.

IN WITNESS WHEREOF, the GRANTOR caused this instrument to be executed on this 16 day of August, 2019.



MICHAEL CALVO, Grantor



SHEILLA VIDAL, Grantor

STATE OF CALIFORNIA)
)ss.
COUNTY OF SOLANO)

On this _____ day of August, 2019, before me, a notary public, personally appeared MICHAEL CALVO and SHEILLA VIDAL, personally known to me or proved on the basis of satisfactory evidence to be the person who subscribed the foregoing instrument, and acknowledged to me that they executed the same freely and voluntarily for the uses and purposes therein expressed.

WITNESS by my hand and official seal.

NOTARY PUBLIC

See Attached California
Acknowledgement/Jurat

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 SOLANO }

On Aug. 16, 2019 before me, Dushyant Dhawan, Notary Public
(Here insert name and title of the officer)

personally appeared Sheilla A. Vidal and Michael A. Calvo
 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.

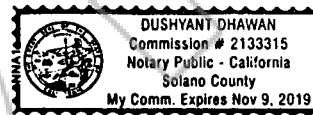
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

[Signature]

Notary Public Signature

(Notary Public Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Grant, Bargain, Sale Deed

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 4 Document Date 8/16/19

CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
 Corporate Officer

(Title)

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

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.

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

STATE OF NEVADA DECLARATION OF VALUE

1. Assessor Parcel Number (s)

- a) 1318-15-820-001
- b) _____
- c) _____
- d) _____

2. Type of Property:

- | | | | |
|--|--------------|-----------------------------|-----------------|
| a) <input type="checkbox"/> | Vacant Land | b) <input type="checkbox"/> | Single Fam Res. |
| c) <input type="checkbox"/> | Condo/Twnhse | d) <input type="checkbox"/> | 2-4 Plex |
| e) <input type="checkbox"/> | Apt. Bldg. | f) <input type="checkbox"/> | Comm'l/Ind'l |
| g) <input type="checkbox"/> | Agricultural | h) <input type="checkbox"/> | Mobile Home |
| i) <input checked="" type="checkbox"/> | Other | | |

FOR RECORDERS OPTIONAL USE ONLY
Notes: _____
SG - Timeshare / Trust OK

3. Total Value/Sales Price of Property:

\$ 0.00
 Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due: \$ 0.00

4. If Exemption Claimed:

- a. Transfer Tax Exemption, per NRS 375.090, Section: 7
- b. Explain Reason for Exemption: _____
This is a transfer of title to a trust, without consideration.

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 [Signature] Capacity Grantor
 Signature [Signature] Capacity Grantee
Sheilla Vidal Family Trust

SELLER (GRANTOR) INFORMATION BUYER (GRANTEE) INFORMATION

(REQUIRED)	(REQUIRED)
Print Name: <u>Sheilla Vidal</u>	Print Name: <u>Michael Calvo . . . Sheilla Vidal Trust, Trustee</u>
Address: <u>P.O. Box 12457</u>	Address: <u>65 Ramsgate Way</u>
City: <u>Zephyr Cove</u>	City: <u>Vallejo</u>
State: <u>NV</u> Zip: <u>89448</u>	State: <u>CA</u> Zip: <u>94591</u>

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)
 Print Name: The Law Office of Angie M. Elquist Escrow # N/A
 Address: 615 South Arlington Avenue
 City: Reno State: Nevada Zip: 89509