

APN: 1318-15-802-007

RECORDING REQUESTED BY:
SIGNATURE TITLE COMPANY LLC
212 ELKS POINT ROAD, SUITE 445, PO
BOX 10297
ZEPHYR COVE, NV 89448

**MAIL RECORDABLE DOCS AND
Tax Statements to:**
DNS Investments Inc.,
195 Hwy 50
PMB 7172-477
Stateline NV 89449

ESCROW NO: 11000903-JML

RPTT \$5,850.00

GRANT, BARGAIN, SALE DEED

THIS INDENTURE WITNESSETH: That **Gill Professional Building LLC, a Nevada Limited Liability Company**

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, do/does hereby Grant, Bargain, Sell, and Convey to:

DNS Investments Inc, a California Corporation

all that real property situated in the City of Zephyr Cove, County of Douglas, State of Nevada, described as follows:

SEE EXHIBIT A ATTACHED HERETO AND MADE A PART HEREOF.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

Gill Professional Building LLC, a Nevada Limited Liability Company

James H. Gill Trustee

The Gill Family Trust June 2, 2009 Manager
By: James H. Gill Trustee

STATE OF NEVADA
COUNTY OF

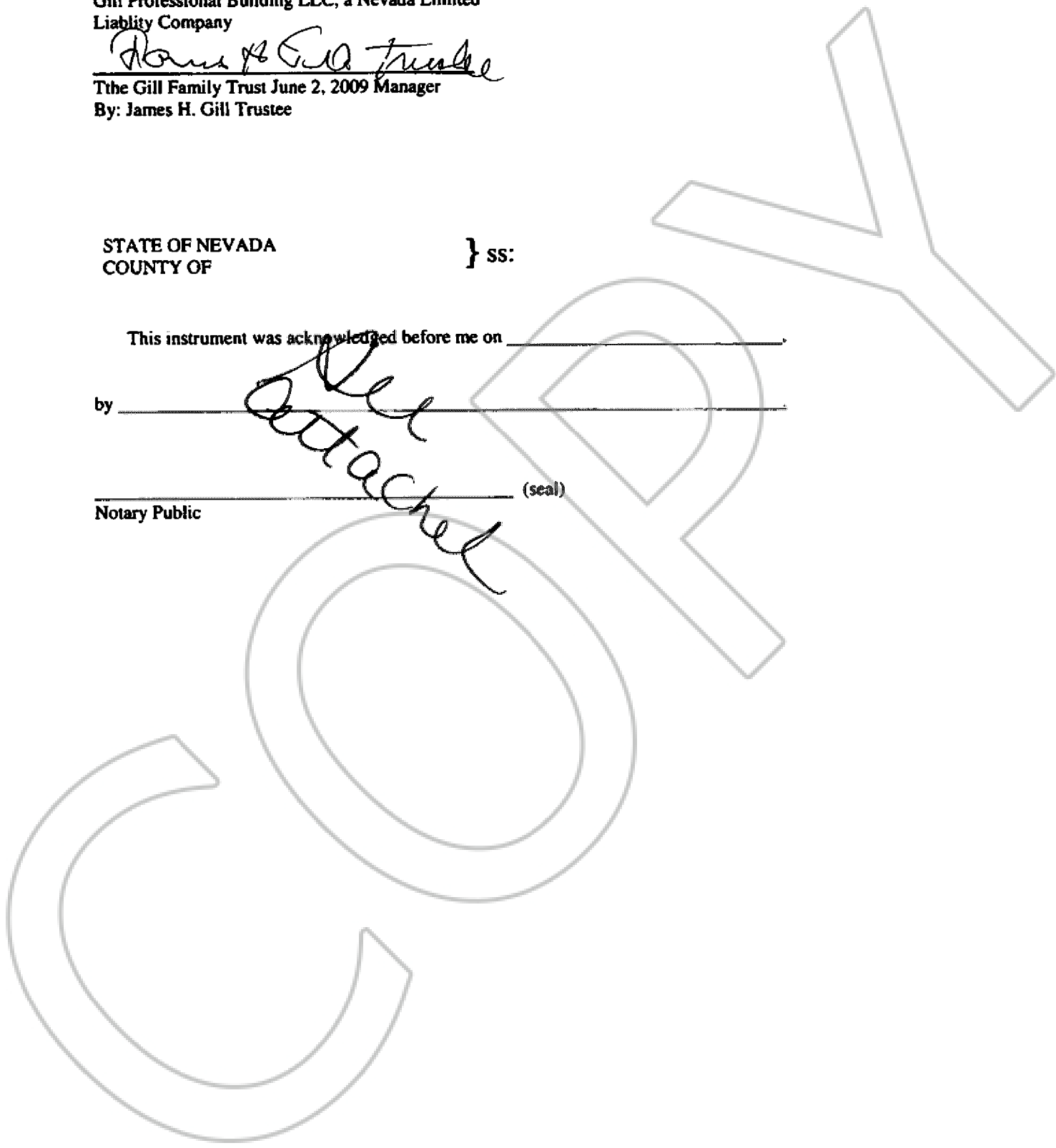
} ss:

This instrument was acknowledged before me on _____

by _____

Notary Public (seal)

*See
attached*



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 VENTURA }

On APRIL 18, 2020 before me, Veronica V. Saucedo, Notary Public
(Here insert name and title of the officer)

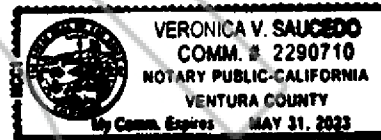
personally appeared JAMES H. GILL
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) ~~is~~ are subscribed to the within instrument and acknowledged to me that ~~he~~ she ~~they~~ executed the same in ~~his~~ her ~~their~~ authorized capacity(ies), and that by ~~his~~ 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.



Notary Public Signature



(Notary Public Seal)

ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

GRANT, BARGAIN, SALE DEED
(Title or description of attached document)

ESCROW # 11000903 - JML
(Title or description of attached document continued)

Number of Pages 2 Document Date 04/18/2020

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.

EXHIBIT A
Legal Description

All that certain lot, piece or parcel of land situated in the County of Douglas, State of Nevada, described as follows:

Portion of the West ½ of the Southeast ¼ of Section 15, Township 13 North, Range 18 East, M.D.B. & M., and being more particularly described as follows:

Commencing at the intersection of the centerline of U.S. Highway 50 and Elks Point Road; thence North 42°24'00" East along said centerline of Elks Point Road, a distance of 308.38 feet; thence continuing along said centerline around a curve to the left having a radius of 350.00 feet through a central angle of 42°12' a distance of 257.79 feet; thence North 89°48' West a distance of 30.00 feet to the Westerly right of way line of Elks Point Road and the True Point of Beginning; thence Southerly along a curve to the right having a radius of 320.00 feet through a central angle of 8°53'25", a distance of 49.60 feet; thence North 35°36' West, a distance of 279.46 feet; thence North 54°00'52" East, a distance of 148.52 feet, more or less, to a point on Elks Point Road; thence South 25°11' East, a distance of 16.10 feet, more or less; thence along a curve to the right having a radius of 420.00 feet through a central angle of 25°23'00" a distance of 186.03 feet; thence South 0°12' West, a distance of 70.52 feet to the Point of Beginning.

Per NRS 111.312, this legal description was previously recorded at Document No. 0745713, Book No. 0609, Page No. 6937, on 06/22/2009.

APN: 1318-15-802-007

**STATE OF NEVADA
DECLARATION OF VALUE FORM**

1. Assessor Parcel Number(s)
 a. 1318-15-802-007
 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'/Ind'l
 g. Agricultural h. Mobile Home
 i. Other _____

FOR RECORDERS OPTIONAL USE ONLY	
Book _____	Page _____
Date of Recording: _____	
Notes: _____	

3. a. Total Value/Sales Price of Property: \$ 1,500,000.00
 b. Deed in Lieu of Foreclosure Only (value of property) \$ _____
 c. Transfer Tax Value \$ 1,500,000.00
 d. Real Property Transfer Tax Due: \$ 5,850.00

4. **If Exemption Claimed**
 a. Transfer Tax Exemption, per NRS 375.090, Section _____
 b. Explain Reason for Exemption: _____

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 parties agree that 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 _____ Capacity Grantee

SELLER (GRANTOR) INFORMATION
(REQUIRED)
 Print Name: Giff Professional Building LLC, a Nevada Limited Liability Company
 Address: PO Box 3196
 City: Camarillo
 State: CA Zip: 93011-3196

BUYER (GRANTEE) INFORMATION
(REQUIRED)
 Print Name: DNS Investments Inc, a California Corporation
 Address: 195 Hwy 50, PMB 7172-477
 City: Stakline
 State/Zip: NV 89448

COMPANY/PERSON REQUESTING RECORDING (Required if not Seller or Buyer)
 Print Name: Signature Title Company LLC Escrow No.: 11000903-110-JML
 Address: 212 Elks Point Road, Suite 445, PO Box 10297
 City, State, Zip: Zephyr Cove, NV 89448

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED