

| | |
|--------------------------------|-----------------|
| A.P.N. No.: | 1320-32-702-009 |
| File No.: | 1220824 WLD |
| Recording Requested By: | |
| Stewart Title Company | |
| When Recorded Mail To: | |
| Jose Sanchez | |
| 3737 Woodside Drive | |
| Carson City, NV 89701 | |



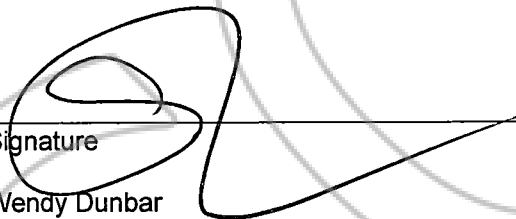
KAREN ELLISON, RECORDER

(for recorders use only)

Affidavit – Death of Joint Tenant
(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 contain the social security number of a person or persons. (Per NRS 440.380 (1)(5) & 40.525 (5))


Signature _____ Escrow Officer _____
Wendy Dunbar _____ Title _____

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)

Dated: May 12, 2021.

Jose Sanchez
Jose Sanchez _____

State of Nevada)
County of Douglas) ss

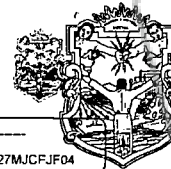
This instrument was acknowledged before me on the 18 day of May, 2021
By: Jose Sanchez

Signature: *M. Bowlen*
Notary Public





ESTADOS UNIDOS MEXICANOS
ESTADO LIBRE Y SOBERANO DE BAJA CALIFORNIA
REGISTRO DEL ESTADO



ACTA DE DEFUNCIÓN

CRIP. _____
CURP: LUT0590427MJCFJF04

| | | | | | |
|-----------------------|-----------------|------------------|------------------|----------------------|---|
| OFICIALÍA No. 0001 | LIBRO No. 10 | ACTA No. 1804 | FOJA No. 1804 | LOCALIDAD TIJUANA | FECHA DE REGISTRO DÍA MES AÑO 21 FEBRERO 2021 |
|-----------------------|-----------------|------------------|------------------|----------------------|---|

| | |
|----------------------|---------------------------------------|
| MUNICIPIO TIJUANA | ENTIDAD FEDERATIVA BAJA CALIFORNIA |
|----------------------|---------------------------------------|

DATOS DEL FINADO

NOMBRE: MARIA OFELIA LUPERCIO SEXO: MASCULINO FEMENINO
(NOMBRE(S)) (PRIMER APELLIDO) (SEGUNDO APELLIDO)
TEJEDA

EDO CIVIL: SOLTERO(A) NACIONALIDAD: MEXICANA EDAD: 61 años 9 meses 23 días
AÑOS MESES DÍAS HORAS FECHA NAC. (DÍA MES AÑO) 27/04/1959

DOMICILIO: WOODSIDE, 3737 CARLSON CITY NEVADA ESTADOS UNIDOS DE AMÉRICA
(LOCALIDAD) (MUNICIPIO) (ENTIDAD) (PAÍS)

LUGAR DE NACIMIENTO: GUADALAJARA GUADALAJARA JALISCO MEXICO
(LOCALIDAD) (MUNICIPIO) (ENTIDAD) (PAÍS)

NOMBRE DEL CÓNYUGE: _____ NACIONALIDAD: _____
NOMBRE PROGENITOR 1: MARIANO LUPERCIO PADILLA NACIONALIDAD: MEXICANA
NOMBRE PROGENITOR 2: SOCORRO TEJEDA DE LUPERCIO NACIONALIDAD: MEXICANA

FALLECIMIENTO
FECHA DE DEFUNCIÓN: 19/02/2021 HORA: 08:30:00
DÍA MES AÑO

LUGAR: CALLE HÉROES DE GRANADITAS 1774 COLONIA INDEPENDENCIA TIJUANA, TIJUANA, BAJA CALIFORNIA, MEXICO CERTIFICADO No.: 21302248
(LOCALIDAD) (MUNICIPIO) (ENTIDAD) (PAÍS)

DESTINO DEL CADÁVER: CREMACIÓN NOMBRE DEL PANTEÓN O CREMATOARIO: CREM PANTEON JARO DE SAN RAMON
UBICACIÓN: ENSENADA, BAJA CALIFORNIA, MEXICO DONDE FALLECIÓ: _____ CRDEN No. 1804

CAUSA DE LA MUERTE: INFARTO AGUDO DEL MIOCARDIO

TIPO DE DEFUNCIÓN: _____
NOMBRE DEL MÉDICO QUE CERTIFICÓ LA DEFUNCIÓN: RICARDO AGUIRRE AGUIRRE
No. DE CÉDULA PROFESIONAL: 1582057

DOMICILIO: CALLE BENITO JUAREZ 262 COL. ZONA CENTRO C.P. 22100, TIJUANA, TIJUANA, BAJA CALIFORNIA, MEXICO
DECLARANTE

NOMBRE: JORGE CRUZ VILLA EDAD: 49
NACIONALIDAD: MEXICANA PARENTESCO: NINGUNO

DOMICILIO: 7, 8054 COLONIA ZONA CENTRO, TIJUANA, TIJUANA, BAJA CALIFORNIA, MEXICO
TESTIGOS

NOMBRE: MARIA SANDRA CID HERNANDEZ NACIONALIDAD: MEXICANA EDAD: 48
DOMICILIO: 7, 8054 COLONIA ZONA CENTRO, TIJUANA, TIJUANA, BAJA CALIFORNIA, MEXICO

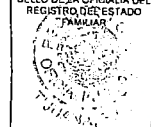
PARENTESCO: NINGUNO
NOMBRE: GUSTAVO MUÑOZ CARRETO NACIONALIDAD: MEXICANA EDAD: 47
DOMICILIO: 7, 8054 COLONIA ZONA CENTRO, TIJUANA, TIJUANA, BAJA CALIFORNIA, MEXICO

PARENTESCO: NINGUNO

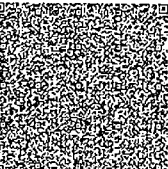
FIRMAS
TESTIGO: _____
DECLARANTE: _____
TESTIGO: _____

ANOTACIONES TRASLADO DE TIJUANA B C VIA TERRESTRE A ENSENADA B C. PARA SU INCINERACIÓN EN CREMATOARIO DE PANTEON JARDINES DE SAN RAMON Y RESGUARDAR CENIZAS EN SU DOM PARTICULAR PERMISO DE UNIDAD REGIONAL CONTRA RIESGOS SANITARIOS DE ISESALUD

SE DIÓ LECTURA A LA PRESENTE ACTA Y CONFORMES CON SU CONTENIDO LA RATIFICAN Y FIRMAN QUIENES EN ELLA INTERVINIERON Y SABEN HACERLO Y QUIENES NO IMPRIMEN SU HUELLA DIGITAL. D.O.Y.F.E.



FIRMA ELECTRONICA
VG Rl bz c3 IE xp Yn Jn Qj Ew IE Zv am ES MT gw NH NB Y3 Rh Qj E4 MD R8 RW 50 aW Rk ZD
pC QU p8 IE NB TE IG T1 JO SU F8 TX Vu aW Np cG Iv Ql Rl SV T8 Rm la YW Rv Ck 18
Uk IB IE 9G RU nJ OS BM VV BF Uk NJ Ty BU RU pF RE Eg Ri Ay Hy Bw NC 8x OT US IE p8 TE
Tt CQ Bg Rl V8 RE Fm QU p8 Uk Ep vE ik YU F3 US Bn RV nJ Q6 FO OS Bn RV nJ Q6 Bg TF
VU Tz US MD Qv NG 1K Q1 bK Kq AU Df Pw 11 h8 Uk 90 OS 18 RG Vm cW Sg aW Bu Qj ES Lz Ay



LIC. MAGALY RONQUILLO PALACIOS
E/C. Oficial No. 1 del Municipio de TIJUANA de la Oficialía 1

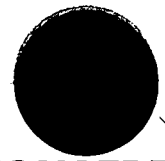
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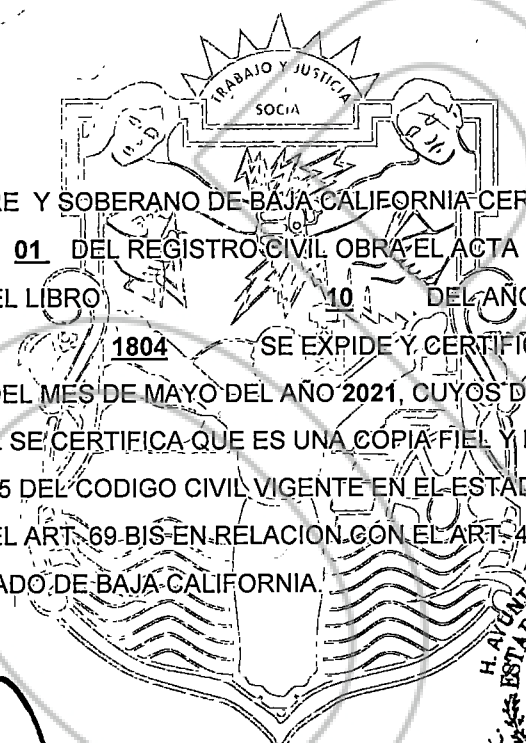
SEGOB

SECRETARÍA DE GOBERNACIÓN

DIRECCIÓN GENERAL DEL
REGISTRO NACIONAL DE POBLACIÓN
E IDENTIFICACIÓN PERSONAL



CONAFREC
Consejo Nacional de Funcionarios
del Registro Civil



EN NOMBRE DEL ESTADO LIBRE Y SOBERANO DE BAJA CALIFORNIA CERTIFICO QUE EN EL ARCHIVO DE ESTA OFICIALIA 01 DEL REGISTRO CIVIL OBRA EL ACTA DE DEFUNCION LA CUAL SE ENCUENTRA EN EL LIBRO 10 DEL AÑO 2021 BAJO LA PARTIDA NUMERO 1804 SE EXPIDE Y CERTIFICA LA PRESENTE COPIA DE REGISTRO A LOS 17 DIAS DEL MES DE MAYO DEL AÑO 2021, CUYOS DATOS APARECEN EN EL ADVERSO Y DE LA CUAL SE CERTIFICA QUE ES UNA COPIA FIEL Y EXACTA DE SU ORIGINAL, EN CUMPLIMIENTO DEL ART. 35 DEL CODIGO CIVIL VIGENTE EN EL ESTADO DE BAJA CALIFORNIA DOY FE. EN LOS TERMINOS DEL ART. 69 BIS EN RELACION CON EL ART. 46 DE LA LEY ORGANICA DEL REGISTRO CIVIL DEL ESTADO DE BAJA CALIFORNIA.

LIC. ANGELICA SELVA DOMINGUEZ
SUB-OFICIAL OFICIAL 01 DEL REGISTRO CIVIL



OFICIALIA 01 DEL
REGISTRO CIVIL
SELLO DE LA OFICIALIA
DEL REGISTRO CIVIL

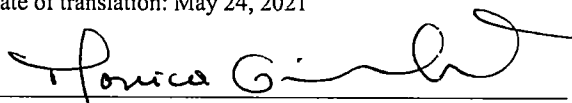
TRANSLATION OF DEATH CERTIFICATE

Part 1

| | | | | | |
|---|-------------|--|-----------------------------------|---|---------------------------------------|
| FOLIO TJA 2727013 | | | | | |
| UNITED STATES OF MEXICO FREE AND SOVEREIGN STATE OF BAJA CALIFORNIA STATE REGISTRATION | | | | | |
| | | | | | CRIP ----- CURP LUTO590427MJCPJF04 |
| DEATH CERTIFICATE | | | | | |
| OFFICE | BOOK | CERTIFICATE | PAGE | LOCALITY | DATE OF REGISTRATION |
| 0001 | 10 | 1804 | 1804 | TIJUANA | FEBRUARY 21, 2021 |
| MUNICIPALITY TIJUANA | | | FEDERAL ENTITY BAJA CALIFORNIA | | |
| DECEDENT DATA | | | | | |
| MARIA OFELIA | | LUPERCIO | | TEJEDA | |
| Names | | First Last Name | | Second Last Name | |
| MARITAL STATUS : SINGLE | | NATIONALITY: MEXICAN | | AGE: 51 Years 2 Months 23 | |
| | | | | YEARS MONTHS DAYS HOURS | |
| DATE OF BIRTH | | | | 04/27/1959 | |
| ADDRESS: WOODSIDE 3737 | | CARSON CITY | | CARSON CITY NEVADA UNITED STATES OF AMERICA | |
| | | Locality Municipality State Country | | | |
| PLACE OF BIRTH : | | GUADALAJARA | | GUADALAJARA JALISCO MEXICO | |
| | | Locality Municipality State Country | | | |
| NAME OF SPOUSE: ----- | | | | NATIONALITY: ----- | |
| NAME PARENT 1 : MARIANO LUPERCIO PADILLA | | | | NATIONALITY: MEXICAN | |
| NAME PARENT 2 : SOCORRO TEJEDA DE LUPERCIO | | | | NATIONALITY: MEXICAN | |
| DEATH | | | | | |
| Date of Death: | | 02/19/2021 | | Time: 08:30:00 | |
| Place: CALLEJON HEROES DE GRANADITA 1774, COLONIA INDEPENDENCIA, TIJUANA TIJUANA BAJA CALIFORNIA, MEXICO | | | | | |
| Certificate Number: 210042248 | | | | | |
| Corpse Destination: CREMATION | | Name of the Cemetary or Crematory: CREMATORY CEMETERY JARD. DE SAN | | | |
| Location: ENSENADA, BAJA CALIFORNIA, MEXICO | | Order Number: 1804 | | | |
| Place of Death: ----- | | | | | |
| Cause of death: ACUTE MYOCARDIAL HEART ATTACK | | | | | |
| Type of death: ----- | | | | | |
| Name of the Doctor who certified the death: RICARDO AGUIRRE AGUIRRE | | | | | |
| Professional License Number: 1562057 | | | | | |
| Address: CALLE BENITO JUAREZ 262 COL. ZONA CENTRO ZIP CODE 22100, TIJUANA , TIJUANA, BAJA CALIFORNIA, MEXICO | | | | | |
| DECLARANT | | | | | |
| Name of declarant: JORGE CRUZ VILLA | | Age: 49 | | | |
| Nationality: MEXICAN | | Relationship: NONE | | | |
| Residence: 7 8054 COLONIA ZONA CENTRO, TIJUANA, TIJUANA, BAJA CALIFORNIA, MEXICO | | | | | |
| Witnesses | | | | | |
| Name: MARIA SANDRA CID HERNANDEZ | | Nationality: MEXICAN | | Age: 48 Relationship: NONE | |
| Address: 7 8054 COLONIA ZONA CENTRO, TIJUANA, TIJUANA, BAJA CALIFORNIA, MEXICO | | | | | |
| Name: GUSTAVO MUNOZ CARRETO | | Nationality: MEXICAN | | Age: 47 Relationship: NONE | |
| Address: 7 8054 COLONIA ZONA CENTRO, TIJUANA, TIJUANA, BAJA CALIFORNIA, MEXICO | | | | | |
| SIGNATURES (3 Illegible signatures) | | | | | |
| NOTES: TRANSFER FROM TIJUANA BC VIA LAND TO ENSENADA BC FOR HER INCINERATION IN THE CREMATORY OF CEMETERY JARDINES DE SAN RAMON AND SAFEGUARD ASH IN YOUR PRIVATE ADDRESS, REGIONAL UNIT PERMIT AGAINST SANITARY RISKS OF ISESALUD. | | | | | |
| THIS CERTIFICATE WAS READING AND ACCORDING TO ITS CONTENT, IT IS RATIFIED AND SIGNED BY THOSE WHO INTERVENED AND KNOW HOW TO DO IT AND THOSE NOT, PRINT THEIR FINGERPRINT. I ATTEST: | | | | | |
| Electronic Signature | | | | | |
| Illegible Signature | | | | | |
| <u>LIC. MAGALI RONGUILLO PALACIOS</u> | | | | | |
| The official citizen 1 of the municipality of Tijuana of the Office 1 | | | | | |
| | | | | | 765491 Office |

*****Certification by Translator*****

I, MONICA GIRALDO TELLO, certify that the foregoing is a complete and accurate translation from Spanish to the English language to the best of my ability. I further certify that I am fully competent to translate from Spanish into the English language and that I am proficient in both languages. Date of translation: May 24, 2021



MONICA GIRALDO TELLO 1315 Leonard Rd, Gardnerville, NV 89460 (775)781-4090

TRANSLATION OF DEATH CERTIFICATE

Part 2

SEGOB
GOVERNMENT SECRETARIAT

**GENERAL DIRECTORATE OF
THE NATIONAL REGISTRY OF POPULATION
AND PERSONAL IDENTIFICATION**

CONAFREC
National Council of
Civil Registry Officials

ON BEHALF OF THE FREE AND SOVEREIGN STATE OF BAJA CALIFORNIA, I CERTIFY THAT IN THE FILE OF THIS OFFICE **01** OF THE CIVIL REGISTRY, THE **DEATH** CERTIFICATE IS REGISTERED, WHICH IS FOUND IN BOOK **10** OF THE YEAR **2021**, UNDER CERTIFICATE NUMBER **1804**. THIS REGISTRATION COPY IS ISSUED AND CERTIFIED ON THE 17TH DAY OF THE MONTH OF MAY **2021**, WHICH DATA APPEARS ON THE ADVERSE AND OF WHICH I CERTIFY THAT IT IS A FAITHFUL AND ACCURATE COPY OF ITS ORIGINAL, IN COMPLIANCE WITH ARTICLE 69 BIS, IN RELATION TO ARTICLE 46 OF THE ORGANIC LAW OF THE CIVIL REGISTRY OF THE STATE OF BAJA CALIFORNIA.

Illegible Signature

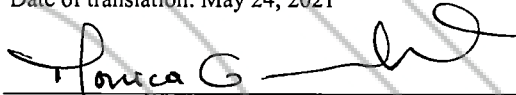
LIC. ANGELICA FELIX DOMINGUEZ
SUB-OFFICIAL OFFICIAL 01 OF THE CIVIL REGISTRY

(SEAL)

SEAL OF THE OFFICE OF CIVIL REGISTRY

*******Certification by Translator*******

I, MONICA GIRALDO TELLO, certify that the foregoing is a complete and accurate translation from Spanish to the English language to the best of my ability. I further certify that I am fully competent to translate from Spanish into the English language and that I am proficient in both languages. Date of translation: May 24, 2021



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