

APN: 1318-09-810-037

**RECORDING REQUESTED BY AND
WHEN RECORDED MAIL TO:**

Ronald D. Alling, Esq.
c/o ALLING & JILLSON, LTD.
Post Office Box 3390
Lake Tahoe, Nevada 89449-3390

Pursuant to *NRS 440.380*, I, the undersigned, affirm that this document submitted for recording does contain personal information of any person or persons.

NOTICE OF DEATH OF TRUSTEE

COMES NOW Dominica C. Anderson, and being first duly sworn, deposes and says:

1. She is the sole serving Trustee of The E&D Anderson 2007 Trust;
2. That she was a Trustee with Eric J. Anderson;
3. Eric J. Anderson and Dominica C. Anderson, Trustees of The E&D Anderson 2007 Trust, acquired an undivided interest in that certain real property situate in the County of Douglas, State of Nevada, legally described as:

Lot 10, Block D as shown on the Amended Map of Subdivision No. 2, Zephyr Cove Properties, Inc., in Sections 9 and 10 Township 13 North, Range 18 East, M.D.B.&M., filed in the office of the County Recorder of Douglas County, Nevada on August 5, 1929, as Document No. 267.

4. That Eric J. Anderson died in San Mateo County, CA, on or about June 13, 2021. The State of California issued a Death Certificate, State File Number 3052021157455, attached hereto as **Exhibit A** and incorporated herein by reference.

5. Section 8.02 B of the Trust states, "In the event of the death of either Eric or Dominica, or if for any reason whatsoever one of them ceases to serve as a Trustee hereunder, the other shall serve as sole Trustee hereunder.

IN WITNESS WHEREOF, Grantor and Trustee has executed this document at Douglas County, Nevada, on this 16th day of August 2021.

Dominica C. Anderson
DOMINICA C. ANDERSON, Trustee

STATE OF NEVADA)
) ss.
COUNTY OF DOUGLAS)

This instrument was acknowledged before me on August 16, 2021, by Dominica C. Anderson.

WITNESS my hand and official seal.

[Signature]
NOTARY PUBLIC



COPY

EXHIBIT A

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY OF SAN MATEO

HEALTH SYSTEM
SAN MATEO, CALIFORNIA

3052021167455

CERTIFICATE OF DEATH

3202141002451

Form containing personal data, residence, informant, spouse, disposition, death details, cause of death, physician, and coroner information.

CERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF SAN MATEO

This is a true and exact reproduction of the document officially registered and placed on file in the office of the SAN MATEO COUNTY HEALTH SYSTEM.

DATE ISSUED 06/24/2021 Christina Ogden

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the County Health Officer.



Signature of Scott Morrow, MD

SCOTT MORROW, MD
HEALTH OFFICER AND REGISTRAR



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE