

APN: 1319-30-643-006

Escrow No. 20213226

Recording Requested By:  
**Vacation Ownership Title Agency**

Mail Tax Statement to:  
Holiday Inn Club Vacations Incorporated  
9271 S. John Young Pkwy.  
Orlando, FL 32819

When Recorded Mail to:  
Wilson Title Services, LLC  
4045 S. Spencer Street, Suite A62  
Las Vegas, NV 89119

AFFIDAVIT – DEATH OF TRUSTEE  
(Title of Document)

------(Only use if applicable)-----

The undersigned hereby affirms that the document submitted for recording contains personal information as required by law: (check applicable)

- Affidavit of Death of Trustee – NRS 440.380(1)(A) & NRS 40.525(5)
- Judgment – NRS 17.150(4)
- Military Discharge – NRS 419.020(2)

\_\_\_\_\_  
Signature

Shanna Haney  
\_\_\_\_\_  
Printed Name

This document is being (re-)recorded to correct document # \_\_\_\_\_, and is correcting

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This page added to provide additional information required by NRS 111.312 Sections 1-2.  
(Additional recording fee applies)

This cover page must be typed.

Recording Requested By:  
Holiday Inn Club Vacations Incorporated  
9271 S. John Young Pkwy.  
Orlando, FL 32819

After Recording Mail To:  
Wilson Title Services, LLC  
4045 S. Spencer Street, Suite A62  
Las Vegas, NV 89119

Send Subsequent Tax Bills To:  
Holiday Inn Club Vacations Incorporated  
9271 S. John Young Pkwy.  
Orlando, FL 32819

Escrow: 20213226  
APN: 1319-30-643-006

### **AFFIDAVIT – DEATH OF TRUSTEE**

**JUNKO OSHIRO**, of legal age, being first duly sworn, deposes and says:

1. That **MASANORI OSHIRO**, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as **MASANORI OSHIRO** named as one of the Trustees in that certain GRANT, BARGAIN, SALE DEED dated May 2, 1995 executed by Masanori Oshiro and Junko Oshiro, husband and wife to Masanori Oshiro and Junko Oshiro, Trustees of the Oshiro Family Trust established May 2, 1995, recorded as Instrument No. 362829, on May 25, 1995 in Book 0595, Page 4026, of Official Records of Douglas County, Nevada, covering the following described property situated in Douglas County, State of Nevada:
2. The real property subject hereof is situated in Douglas County, State of Nevada, bounded and described as follows:  
See **Exhibit 'A'** attached hereto and by reference made a part hereof.

3. That the undersigned affiant, **JUNKO OSHIRO, TRUSTEE**, is the surviving trustee along with Kevin Oshiro, Keith Oshiro and Julie Oshiro of the Oshiro Family Trust, dated May 2, 1995

I, **JUNKO OSHIRO, TRUSTEE**, hereby affirm that this document submitted for recording contains personal information (social security number, driver's license numbers or identification card number) of a person as required by a specific law, public program or grant that requires the inclusion of the personal information. The Nevada Revised Statute (NRS), public program or grant referenced is (NRS) 40.525.

DATED this 11<sup>th</sup> day of June, 20 21,

Junko Oshiro, Trustee  
Signature **JUNKO OSHIRO, TRUSTEE**

STATE OF: CALIFORNIA )

COUNTY OF: LOS ANGELES )

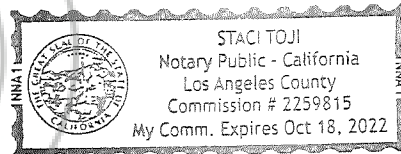
SS

SUBSCRIBED AND SWORN before me this 11<sup>th</sup> day of JUNE, 20 21,  
by **JUNKO OSHIRO, TRUSTEE**.

Staci Toji  
Notary Public Signature

Printed Name: STACI TOJI

My Commission Expires: OCT. 18, 2022



STAMP/SEAL

**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH**

3052010108044

**CERTIFICATE OF DEATH**

3201019027238

STATE FILE NUMBER 3052010108044		STATE OF CALIFORNIA USE BLACK INK ONLY / NO ERASURES, WET SOUTS OR ALTERATIONS VS-11a (REV 3/06)		LOCAL REGISTRATION NUMBER 3201019027238	
1. NAME OF DECEDENT - FIRST (Given) <b>MASANORI</b>		2. MIDDLE -		3. LAST (Family) <b>OSHIRO</b>	
AKA, ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)		4. DATE OF BIRTH mm/dd/ccyy <b>06/28/1932</b>		5. AGE Yrs. <b>78</b>	
9. BIRTH STATE/FOREIGN COUNTRY <b>HAWAII</b>		10. SOCIAL SECURITY NUMBER <b>3305</b>		11. EVER IN U.S. ARMED FORCES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
13. EDUCATION - Highest Level/Degree (see worksheet on back) <b>ASSOCIATE</b>		14/15. WAS DECEDENT HISPANIC/LATINO(A)/SPANISH? (if yes, see worksheet on back) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		12. MARITAL STATUS/SDRP* (at Time of Death) <b>MARRIED</b>	
17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED <b>CIVIL ENGINEER</b>		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.) <b>GOVERNMENT</b>		7. DATE OF DEATH mm/dd/ccyy <b>07/10/2010</b>	
16. DECEDENT'S RACE - Up to 3 races may be listed (see worksheet on back) <b>JAPANESE</b>		8. HOUR (24 Hours) <b>1530</b>		6. SEX <b>M</b>	
20. DECEDENT'S RESIDENCE (Street and number, or location) <b>1219 W. 184TH ST.</b>		21. CITY <b>GARDENA</b>		22. COUNTY/PROVINCE <b>LOS ANGELES</b>	
23. ZIP CODE <b>90248</b>		24. YEARS IN COUNTY <b>54</b>		25. STATE/FOREIGN COUNTRY <b>CALIFORNIA</b>	
26. INFORMANT'S NAME, RELATIONSHIP <b>JUNKO OSHIRO, WIFE</b>		27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip) <b>1219 W 184TH ST., GARDENA, CA 90248</b>			
28. NAME OF SURVIVING SPOUSE/SDRP - FIRST <b>JUNKO</b>		29. MIDDLE -		30. LAST (BIRTH NAME) <b>OSHIRO</b>	
31. NAME OF FATHER/PARENT - FIRST <b>KAMESUKE</b>		32. MIDDLE -		33. LAST <b>OSHIRO</b>	
34. BIRTH STATE <b>JAPAN</b>		35. NAME OF MOTHER/PARENT - FIRST <b>KAME</b>		36. MIDDLE -	
37. LAST (BIRTH NAME) <b>OSHIRO</b>		38. BIRTH STATE <b>JAPAN</b>		19. YEARS IN OCCUPATION <b>34</b>	
39. DISPOSITION DATE mm/dd/ccyy <b>07/14/2010</b>		40. PLACE OF FINAL DISPOSITION <b>ROOSEVELT MEMORIAL PARK 18255 S. VERMONT AVE., GARDENA, CA 90247</b>			
41. TYPE OF DISPOSITION(S) <b>CR/BU</b>		42. SIGNATURE OF EMBALMER <b>SHIGERU OKAMOTO</b>		43. LICENSE NUMBER <b>EMB4518</b>	
44. NAME OF FUNERAL ESTABLISHMENT <b>FUKUI MORTUARY, INC.</b>		45. LICENSE NUMBER <b>FD808</b>		46. SIGNATURE OF LOCAL REGISTRAR <b>JONATHAN FIELDING, MD</b>	
47. DATE mm/dd/ccyy <b>07/13/2010</b>		101. PLACE OF DEATH <b>TORRANCE MEMORIAL MEDICAL CENTER</b>			
104. COUNTY <b>LOS ANGELES</b>		105. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location) <b>3330 W. LOMITA BLVD.</b>		106. CITY <b>TORRANCE</b>	
107. CAUSE OF DEATH Enter the chain of events -- diseases, injuries, or complications -- that directly caused death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. <b>(A) RESPIRATORY FAILURE</b> <b>(B) MYOFIBRILLAR MYOPATHY</b>		108. DEATH REPORTED TO CORONER? Time Interval Between Onset and Death <b>(AT) DAYS</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		109. BIOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
110. AUTOPSY PERFORMED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		111. USED IN DETERMINING CAUSE? <input type="checkbox"/> YES <input type="checkbox"/> NO		112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 <b>NONE</b>	
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (if yes, list type of operation and date) <b>NO</b>		113A. IF FEMALE, PREGNANT IN LAST YEAR? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK			
114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED. Decedent Attended Since: <b>07/07/2010</b> Decedent Last Seen Alive: <b>07/10/2010</b>		115. SIGNATURE AND TITLE OF CERTIFIER <b>CHAN-CHOU CHUANG M.D.</b>		116. LICENSE NUMBER <b>A60989</b>	
117. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE <b>CHAN-CHOU CHUANG M.D. 3330 W. LOMITA BLVD., TORRANCE, CA 90505</b>		117. DATE mm/dd/ccyy <b>07/13/2010</b>			
119. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		120. INJURED AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK		121. INJURY DATE mm/dd/ccyy	
122. HOUR (24 Hours)		123. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)			
124. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)					
125. LOCATION OF INJURY (Street and number, or location, and city, and zip)					
126. SIGNATURE OF CORONER / DEPUTY CORONER		127. DATE mm/dd/ccyy		128. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	

STATE REGISTRAR A B C D E \*010001001544913\* FAX AUTH.# CENSUS TRACT

This is a true certified copy of the record filed in the County of Los Angeles Department of Public Health if it bears the Registrar's signature in purple ink.

*Jonathan Fielding MD*  
DATE ISSUED



JUL 14 2010

Director of Public Health and Registrar

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE



**EXHIBIT "A"**

**(28)**

**An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/50<sup>th</sup> interest in and to Lot 28 as shown on Tahoe Village Unit No. 3 - 13<sup>th</sup> Amended Map, recorded December 31, 1991, as Document No. 268097, re-recorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 1 through 50 (inclusive) as shown on said map; and (B) Unit No. 006 as shown and defined on said map; together with those easements appurtenant thereto and such easements described in the Fourth Amended and Restated Declaration of Time Share Covenants, Conditions and Restrictions for The Ridge Tahoe recorded February 14, 1984, as Document No. 096758, as amended, and in the Declaration of Annexation of The Ridge Tahoe Phase Six, recorded December 18, 1990, as Document No. 241238, as amended by Amended Declaration of Annexation of The Ridge Tahoe Phase Six, recorded February 25, 1992, as Document No. 271727, and as described in the Recitation of Easements Affecting the Ridge Tahoe recorded February 24, 1992, as Document No. 271619, and subject to said Declarations; with the exclusive right to use said interest, in Lot 28 only, for one week each year in accordance with said Declarations.**

**A Portion of APN: 1319-30-643-006**