DOUGLAS COUNTY, NV

2022-986969

Rec:\$40.00

\$40.00 Pgs=8

07/01/2022 04:40 PM

VACATION OWNERSHIP TITLE AGENCY

KAREN ELLISON, RECORDER

APN: 1319-30-644-071 Escrow No. 20223562

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

This cover page must be typed.

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) X 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 # 2021-962489 , and is correcting: The APN to be 1319-30-644-071, the date of the Trust Deed to June 15, 1995 and the legal description. Transfer Tax paid on original Deed recorded February 24, 2021 as Document Number 2021-962489. This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fee applies)

DOUGLAS COUNTY, NV

Rec:\$40.00 Total:\$40.00 CAROL ROBY 2021-962489 02/24/2021 02:28 PM

Pgs=4

A portion of APN: 1319-30-645-003

RECORDING REQUESTED BY STEWART VACATION OWNERSHIP 00129299202109624890040044

KARENELLISON, RECORDER

WHEN RECORDED MAIL TO:

WILSON TITLE SERVICES, LLC 9271 S. JOHN YOUNG PARKWAY ORLANDO, FL 32819

Escrow No:

RECORDERS USE ONLY

AFFIDAVIT-DEATH OF TRUSTEE

STATE OF CALIFORNIA

SS.

COUNTY OF SAN JOAQUIN

Carol Ann Roby , of legal age, being duly sworn, deposes and says

That <u>Gordon A. Roby</u>, the decedent mentioned in the attached Certificate of Death, is the same person as <u>Gordon A. Roby</u> named as a Trustee of that certain Declaration of Trust dated <u>May 15, 1995</u> and designated the Trustee in the Deed recorded in Douglas County, State of Nevada on <u>June 23, 1995</u> in Book <u>695</u> at Page <u>3913</u> as Document No. <u>364710.</u>

In accordance with the above referenced trust, <u>Carol Ann Roby</u> shall act as successor trustee of said trust on the death of <u>Gordon A. Roby</u>.

<u>Carol Ann Roby</u> is filing this Affidavit with the Douglas County Recorder to establish the succession of <u>the Trustees of the Roby Family Trust</u>, as successor trustee pursuant to the aforesaid trust. The trust estate includes an interest in real property located in Douglas County, State of Nevada, which is more fully described in **Exhibit** 'A' attached hereto and incorporated herein by reference.

Dated: 2-23-2021

Signature-Carol Ann Roby

071

A portion of APN: 1319-30-645-003

RECORDING REQUESTED BY STEWART VACATION OWNERSHIP

WHEN RECORDED MAIL TO:

WILSON TITLE SERVICES, LLC 9271 S. JOHN YOUNG PARKWAY ORLANDO, FL 32819

DOUGLAS COUNTY, NV Rec:\$40.00 Total:\$40.00

CAROL ROBY

2021-962489

02/24/2021 02:28 PM

Pas=4



KAREN ELLISON, RECORDER

Escrow No:

RECORDERS USE ONLY

AFFIDAVIT-DEATH OF TRUSTEE

STATE OF CALIFORNIA

SS.

COUNTY OF SAN JOAQUIN

, of legal age, being duly sworn, deposes and says Carol Ann Roby

That Gordon A. Roby, the decedent mentioned in the attached Certificate of Death, is the same person as Gordon A. Roby named as a Trustee of that certain Declaration of Trust dated May 15, 1995 and designated the Trustee in the Deed recorded in Douglas County, State of Nevada on June 23, 1995 in Book 695 at Page 3913 as Document No. 364710.

*June 15, 1995

In accordance with the above referenced trust, **Carol Ann Roby** shall act as successor trustee of said trust on the death of Gordon A. Roby.

Carol Ann Roby is filing this Affidavit with the Douglas County Recorder to establish the succession of the Trustees of the Roby Family Trust, as successor trustee pursuant to the aforesaid trust. The trust estate includes an interest in real property located in Douglas County, State of Nevada, which is more fully described in Exhibit 'A' attached hereto and incorporated herein by reference.

Dated: 2-23-202

Signature-Carol Ann Roby

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 SAN JOAQUIN)

On February 23, 2021, before me, MICHAEL T. GREENBERG, Notary Public, personally appeared CAROL ANN ROBY, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her authorized capacity, and that by her signature on the instrument the person, or the entity upon behalf of which the person 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

MICHAEL T. GREENBERG
Notary Public - California
San Joaquin County
Commission # 2288895
My Comm. Expires Jun 14, 2023

SAN JOAQUIN COUNTY

PUBLIC HEALTH SERVICES STOCKTON, CALIFORNIA

	3052	01622534	4	* ************************************	CERTIFICATE OF DEATH					3201639004419				
NAMES					USE BLACK NIK ONLY / NO ERSAIRES, WHITFOUTS OR ALTERATIONS VS-1 (a(REV 3/06) 2. MIDDLE 3. LAST (Family)				LOCAL REGISTRAT	ON NUMBER				
DECEDENT'S PERSONAL DATA	GORDON AKA, ALSO KNOWN AS - Include full AKA (FIRST, MIDDLE, LAST)		1 350 0 530	ALAN		ROBY			F UNDER ONE YEAR	IF UNDER 24 HOURS 6, Se	EV.			
	AN ALSO INTO IN	A CHICAGO INITA	or (more, model, b	A CONTROL OF THE CONT	Activities (02/01/1	1948	68 [Ionths Days	Hours Minutes M			
	9. BIRTH STATE/FOR	EIGN COUNTRY	10. SOCIAL SEC	CURITY NUMBER 759	11. EVER IN U.S			MARITAL STATUS/S	RDP* (at Time of Death)	7. DATE OF DEATH mn 11/14/2016	Vdd/ccyy 8. HOUR (24)	Hours)		
	13: EDUCATION - Highest Level/Degree 14/15, WAS DECEDENT HISPANIC/LATINO(A)/SPAI des worksheet on back): BACHELOR: YES:										be listed (see worksheet on back)			
	17. USUAL OCCUPATION - Type of work for most of lifeDO NOT USE RETIR			IOT USE RETIRED	TIREO 18. KIND OF BUSINESS OR INDUSTRY (e.g., groccey store, road construction, WHOLESALE LUMBER						etc.) 19, YEARS IN OCCUI	JPATION		
USUAL	20. DECEDENT'S RES		A 444 (444 (444 (444 (444 (444 (444 (44		No.		3333	**************************************						
	21. CITY 22. C			22 COUNTY/PROVIN	OUNTY/PROVINCE N JOAQUIN			******	4. YEARS IN COUNT	Y 14.5. 396.63	25. STATE-FOREIGN COUNTRY			
ANT R	26: INFORMANT'S NAME, RELATIONSHIP CAROL ROBY, WIFE			JANTOAG					71	er, or rural route number, city or town, state and zip).				
SPOUSE/SRDP AND INF	28. NAME OF SURV	ATTEN - ATT - ATT	29. MIDDLE			30. LAST (BIRTH)	The same of the sa		in in the second					
	CAROL 31, NAME OF FATHER/PARENT-FIRST			ANN 32, MIDDLE				PRETL 335, LAST			I 34 BIRTH STATE	34, BIRTH STATE		
	THOMAS			36. MIDDLE	-			ROBY			CA 38, BIRTH STATE	300		
	95. NAME OF MOTHER/PARENT-FIRST. JOSEPHINE							PARODI	NAME)	Managa Januara	CA			
CTOR/	39. DISPOSITION DA 11/21/2016			BRIA WAY,							i (hi) www.	ă.		
IL DIRE	41. TYPE OF DISPOSITION(S) CR/RES				42. SIGNATURE OF EMBALMER. NOT EMBALMED						43. LICENSE NUMBER			
FUNER	44, NAME OF FUNERAL ESTABLISHMENT LODI FUNERAL HOME				45. LICENSE NUMBER 46. SIGNATURE OF LOCAL REGISTRAR FD627 ALVARO GARZA, MD, MPH							.47. DATE mm/dd/ccyy		
	102, IF HOSPITAL SPECIFY ONE 103, IF OTHER THAN HOSPITAL SPECIFY ONE LODI MEMORIAL HOSPITAL SPECIFY ONE X IP. ENOP 0.00A Hospics Murring Decedents Other Home													
PLACE OF DEATH					CATION WHERE FOUND (Street and number, of location):									
	107. CAUSE OF DEA	Ba		ents — diseases, injuries, piratory arrest, or ventricu			caused death etiology. DO	DO NOT enter term NOT ABBREVIATE	ninal events such	: Time Interval Between Conset and Clear		- N		
	IMMEDIATE CAUSE (Final disease or condition resulting in death)	A) ACUTE →	RESPIRATO	ESPIRATORY FAILURE						109, BIOPSY PERFORME	1			
	Sequentially, list conditions, if any,	® RIGHT	T.LÜNG COLLAPSE							DYS	YES X	NO .		
JF DEAT	leading to cause on Line A. Enter UNDERLYING CAUSE (disease or	(C) METAS	METASTATIC LUNG CANCER								110. AUTOPSY PERFORM	353		
AUSEO	injury that initiated the events resulting in death) U	(D) UST		14.	1 80				14410 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(01)	111, USED IN DETERMINING C	CAUSE?		
	112 OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO CEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE SIVEN IN 107 PULMONARY EMBOLISM, NON ST SEGMENT MYOCARDIAL INFARCTION													
	113, WAS OPERATION	ON PERFORMED F	OR ANY CONDITION I	N ITEM 107 OR 1127 (IF	yes, list type of	operation and	date.)		100 000 100 100 100 100 100 100 100 100		3A. IF FEMALE, PREGNANT IN LAS	STYEAR?		
HYSICIAN'S	AT THE HOUR, DATE, A	ND PLACE STATED FF	NOWLECKIE DEATH OCCU	CATH	RINE V	ERA CA	ARROI	1 M D	V(2)	116, LICENSE NI A11785	5. 41/18/2016	- 1		
	(A) mm/dd/ccyy (B) mm/dd/ccyy 118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE CATHERINE VERA CAR								RROLL M.D.	-				
5	11/06/2016 119. I CERTIFY THAT IN MANNER OF DEATH	MY OPINION DEATH	OCCURRED AT THE HO	UR, DATE, AND PLACE STA		AUSES STATED.	Could not be	120. INJURIED		121. INJURY DAT	E mm/dd/ccyy 122. HOUR (2	(24 Hours)		
CORONER'S USE ONLY	55.5		Accident H	A. A	fivestiga	ation	determined	1.5.				2.33		
	124, DESCRIBE HO	W INJURY OCCUP	RRED (Events which re	sulted in injury)				- Carpental Control	**************************************	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	125. LOCATION OF	INJURY (Street an	d.number, or location,	and city, and zip)		 332 - 2 1		man.		3	1.50			
	126. SIGNATURE O	F CORONER / DEF	PUTY CORONER	200 M	112	7. DATE mm/	dd/ccvv	128: TYPE NAM	E. TITLE OF CORON	ER / DEPUTY CORONE	2 ⁷ 22 2222			
No. of Lot, House, etc., in such such such such such such such such)	7		/ <u>*****</u>	100 mg		- 110 P P P P P P P P P P P P P P P P P P	100 A	2000 10 10 10 10 10 10 10 10 10 10 10 10		10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (TDAGE		
	ATE A STRAR	.B	C	D E			*01000	1003396689*		FAX AUTH.#	CENSUS	IHACT		
177		100 . F2000 000 . F2000		1000		2.22			1 14 10 14 14 14 14	R 48 10 (884) 8 61 0 11 0 0	DIRECT STATE STATE (***)			

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA COUNTY OF SAN JOAQUIN

DATE ISSUED:

NOV 2 8 2016

This is a true and exact reproduction of the document officially registered and placed on file with San Joaquin County Public Health Services.

000752410



SAN JOAQUIN COUNTY

PUBLIC HEALTH SERVICES STOCKTON, CALIFORNIA

		16225344		- IIGE	CERTIFIC STATE BLACK DAK ONLY / NO S	ATE OF DEA E OF CALIFORNIA RASURES, WHITEOUTS OR -11¢(REV 3/05)	ATH		320163900	8.0			
483. 388	1. NAME OF DECEDE	TE FILE NUMBER		· 2. MIDDL	E	-11 _{e(REV 3/06)}	3. LAST	(Family)	LOCAL REGISTRATION	NUMBER			
SPEF	GORDON AKA, ALSO KNOWN A		- COOT HIDOUT LA	ALAI	V	·	ROB		UNDER ONE YEAR IF	UNDER 24 HOURS			
	AKA, ALSO KNOWN A	S - INCLUDE TUIL AIX	K (FINS), MILLULE, LA	51)	TOTAL CONTROL OF THE	02/01/		5. AGE Yrs. 1. M	onths Days H	ours Minute	M		
	9. BIRTH STATE/FORE	IGN COUNTRY		759	11. EVER IN U.S. AF		MARRIED		DATE OF DEATH mm/di 11/14/2016	з/ссуу 8. НО 	UR: (24 Hours) 51		
	13. EDUCATION - Highest Level/Degree 14/15. WAS DECEDENT HISPANICA/ITNO(A/SPANISH? (if yes, see worksheet on bach) 16. DECEDENTS RACE – Up to 3. races may be fisted (see worksheet on bach) VES									on back)			
DEC	17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED 18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency; etc. CO-OWNER. WHOLESALE LUMBER									19. YEARS	The second secon		
INGE.	20. DECEDENT'S RESIDÊNCE (Street and number, or location) 2921 CUMBRÍA WAY												
	22. COUNTY/PROVINCE								CA	2 32 52 2 12 5 5			
MANT	25. INFORMANT'S NAME, RELATIONSHIP 27. INFORMANT'S NAME, RELATIONSHIP 2921 CUMBRIA WAY, LODI, CA 95242 CAROL ROBY, WIFE									7.5			
SPOUSE/SRDP AND PARENT INFORMATION	28. NAME OF SURVIV CAROL	ING SPOUSE/SRE	P*-FIRST	29. MIDDLE ANN			20. LAST (BIRTH PRETL	NAME		20 A			
	31, NAME OF FATHER/PARENT-FIRST THOMAS			32. MIDDLE	ROBY				34, BIRTH STATE CA				
	JOSEPHINE -			36. MIDDLE			37. LAST (BIRTH PARODI	NAME)		CA	THISTATE		
FUNERAL DIRECTOR/ LOCAL REGISTRAR	38. DISPOSITION DATE imm/daglooy 40. PLACE OF FINAL DISPOSITION RES CAROL. ROBY 2921: CUMBRIA WAY, LODI, CA 95242												
	41, TYPE OF DISPOSI CR/RES	TION(S)			42 SIGNATURE C ▶ NOT EI		43: LICENSE NUMBER						
	44. NAME OF FUNER LODI FUNE	RAL HON	Ě		45, LICENSE NUM FD627	46. SIGNATUF ▶ ALVA	. 53	47. DATE mm/dd/ccyy/					
ı.	101. PLACE OF DEATH	14.00	SPITAL			102. IF I	HOSPITAL, SPECIF	Y ONE 103. IF C	THER THAN HOSPITAL, S	Deceder	nt's Other		
PLACE DEAT	106: COUNTY 106: FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location): 106: CITY SAN JOAQUIN 975'S FAIRMONT AVE LODI												
44	107, CAUSE OF DEATH Enter the chain of events — deesses, hjuries, or complications — that directly caused death, DO NOT enter terminal events such Time interval between Social and Soci									108, DEATH REPOR	ΧNO		
Е ОГ DEATH	IMMEDIATE CAUSE (Final disease or condition ensuling in death) (PRIGHT: LUNG COLLAPSE (PRIGHT: LUNG COLLAPSE)								DYS	109. BIOPSY PE			
	Sequentially, list conditions, if any, leading to cause			IG CANCER	The same of the sa					DYS YES X NO (CT) 116 AUTOPSY PERFORMED?			
	on Line A. Enter UNDERLYING CAUSE (disease or injury that initiated the events	(D)	TATIC LUIS	IG CAIXGE	A See	MONS							
OVO	Initiated use oversity of death) LST T12. CITIER SIGNAFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107 PULMONARY EMBOLISM, NON ST SEGMENT MYOCARDIAL INFARCTION									NO			
	PULMONARY EMBOLISM, NON ST SEGMENT MYOCARDIAL INFARCTION 1134, WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 1127 (If yes, list type of operation and date) 1134, WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 1127 (If yes, list type of operation and date) 1134, WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 1127 (If yes, list type of operation and date)												
	NO				RE AND TITLE OF C					YES N	io Unik		
ICIAN'S	AT THE HOUR, DATE, AN Decedent Attended (A) mm/dd/ccyy	i Since I	OM THE CAUSES STATED. Decedent Last Seen Aliv mm/dd/ccyv	CATH	ERINE VE	ZA CARROI	L M.D.	SATUEDIA	A117855 IE VERA CAF	11/18/	2016		
CERT	11/06/2016	tut. jujuhi	14/2016	975 S F.	AIRMONT	AVE, LODI,	CA:95240	DAT WORK?	121, INJURY DATE				
CORONER'S USE ONLY	MANNER OF DEATH	Natural	Accident Ho	micide Suicide	Pénding (nvestigation	Gould not be determined	YES.	NÖ UN	ĸ				
		4			NATION 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 (10 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m	Victoria de la constanta de la			1000		
			RED (Events which res								1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
			number, or location, a	and city, and zip)	200 000 000 000 000 000 000 000 000 000	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	#### 144 ###############################	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		SA sag			
·	126. SIGNATURE OF	CORONER / DEP	UTY CORONER	AND	127.0	ATE mm/dd/ccyy	128. TYPE NAM	E, TITLE OF CORONE	R / DEPUTY CORONER	**************************************	10 10 10 10 10 10 10 10 10 10 10 10 10 1		
STA	ATE A STRAR	В	С	D E		*0100	01003396689*		FAX AUTH.#	CI	ENSUS TRACT		
130	7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.7.	200 1328	glist Terr		NA.		and the	1 19 2 (1) 2 2 (1) 2 2 (1)	4 33 44 (222) 2442 (234 2	III 2016) BIN 188	l		

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA COUNTY OF SAN JOAQUIN

NOV 2 8 2016

000752405

This is a true and exact reproduction of the document officially registered and placed on file with San Joaquin County Public Health Services.

ALVARO GARZA, M.D., M.P.H.

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



Exhibit A

(A) An undivided 1/38th interest in and to Lot 34 as shown on Tahoe Village Unit No. 3 – 13th 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 001 through 038 (inclusive) as shown on certain Condominium Plan recorded June 22, 1987, as Document No. 156903; and

(B) Unit 162, 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 Rocument No. 241238, as amended by Amended Declaration of Annexation of The Ridge Tahoe Phase Six, recorded February 25, 1992, as Document No. 271727, as each may be amended, supplemented, and amended and restated from time to time (collectively, the "Declarations") 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 34 only, for one week each year in the Swing "Season" in accordance with said Declarations.

TOGETHER WITH all the improvements now or hereafter erected on the property, and all: easements, rights, appurtenances, rents, royalties, mineral, oil and gas rights and profits, water rights and stock and all fixtures now or hereafter a part of the Property. All replacements and additions shall also be covered by this Deed. All of the foregoing together with all personal property associated therewith is part of the Property described above.

SUBJECT TO: (i) any and all rights, rights of way, reservations, restrictions, agreements, covenants, encumbrances, easements, mineral exceptions and reservations, and all conditions of record; (ii) the Declaration; and (iii) Real Estate Taxes that are currently not due and payable but are a lien against the Property.

TITLE TO THE PROPERTY is herein transferred with all tenements, hereditaments and appurtences thereunto belonging or appertaining, and the reversion and revisions, remainder and remainders, rents, issues and profits thereof.

TO HAVE AND TO HOLD, the said Property unto the said Grantee, their heirs and successors and assigns forever in fee simple.

EXHIBIT "A"

(37)

An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/106th interest in and to Lot 37 as shown on Tahoe Village Unit No. 3 - 13th 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 039 through 080 (inclusive) and Units 141 through 204 (inclusive) as shown on that certain Condominium Plan recorded July 14, 1988, as Document No. 182057; and (B) Unit No. 162 as shown and defined on said Condominium Plan; 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 Five recorded August 18, 1988, as Document No. 184461, as amended, 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 37 only, for one week each year in the Swing "Season" as defined in and in accordance with said Declarations.

A Portion of APN: 1319-30-644-071