

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

AFFIDAVIT OF DEATH TERMINATING JOINT TENANCY

The undersigned, Alicia L. Inafuku, of legal age, being first duly sworn, deposes and states the following as required by NRS 111.365:

1. That Raymond Hideichi Inafuku having become deceased on 01/19/2000 pursuant to the attached Certificate of Death, is the same person Ray H. Inafuku named as one of the parties in that certain Grant, Bargain, Sale Deed dated 10/19/1993 to Ray H. Inafuku And Alicia L. Inafuku, Husband And Wife As Community Property, recorded on 10/29/1993, as Recorded Document No. 321403 of Official Records of the Douglas County Recorder's Office, Douglas County, State of Nevada.
2. The real property subject hereof is situated in the Douglas of Clark, State of Nevada, bounded and described as follows:

See attached Exhibit A – Legal Description attached hereto and made a part hereof
3. That the undersigned affiant, Alicia L. Inafuku, is the surviving spouse/tenant of the named decedent.

I, Alicia L. Inafuku, 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 21 day of December, 2023.

Alicia L. Inafuku
Affiant: Alicia L. Inafuku

STATE OF: California)
COUNTY OF: Santa Clara) Ss

THIS instrument was acknowledged before me this 21st day of December, 2023, by Alicia L. Inafuku, who is personally known to me or has produced CA - Senior Citizen I.D. as identification.

WITNESS my had and seal at office, on this 21st day of December, 2023

A.K. Sandhu
Notary Public Signature

A.K. Sandhu
Notary Public Printed Name
My Commission Expires: Dec 06, 2024



(SEAL)

EXHIBIT "A"
LEGAL DESCRIPTION
Ridge Tahoe (Lot 37)

ALL THAT REAL PROPERTY SITUATED IN THE COUNTY OF DOUGLAS, STATE OF NEVADA, BOUNDED AND DESCRIBED AS FOLLOWS:

That certain timeshare estate, as said timeshare estate is defined 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, 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, which timeshare estate is comprised of:

an undivided 1/51st interest as tenants in common, with each interest having a 1/51st interest 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. **176** 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: **1319-30-644-086**

As shown with Interval Id # **3717645A**

Contract No: **6747321**

Ridge Tahoe (Lot 37 – Annual)

STATE OF CALIFORNIA

CERTIFICATION OF VITAL RECORD

COUNTY of SANTA CLARA

PUBLIC HEALTH

2220 MOORPARK AVENUE., SAN JOSE, CALIFORNIA 95128

CERTIFICATE OF DEATH

STATE OF CALIFORNIA

USE BLACK INK ONLY NO ERASURES, WHITEOUTS OR ALTERATIONS

VB-11 (REV. 1/00)

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER			
1. NAME OF DECEDENT—FIRST (GIVEN) Raymond		2. MIDDLE Hideichi		3. LAST (FAMILY) INAFUKU	
4. DATE OF BIRTH MM/DD/CCYY 12/15/1933		5. AGE YRS. 66		6. SEX M	
7. DATE OF DEATH MM/DD/CCYY 01/19/2000		8. HOUR 0740			
9. STATE OF BIRTH Hawaii		10. SOCIAL SECURITY NO. [REDACTED]-2051		11. MILITARY SERVICE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
12. MARITAL STATUS Married		13. EDUCATION—YEARS COMPLETED 16			
14. RACE Japanese		15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. USUAL EMPLOYER NEC	
17. OCCUPATION Salesman		18. KIND OF BUSINESS electronics		19. YEARS IN OCCUPATION 25	
20. RESIDENCE—(STREET AND NUMBER OR LOCATION) 1536 Hollenbeck Avenue					
21. CITY Sunnyvale		22. COUNTY Santa Clara		23. ZIP CODE 94087	
24. YRS IN COUNTY 32		25. STATE OR FOREIGN COUNTRY CA			
26. NAME, RELATIONSHIP Alicia Inafuku-wife			27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 1536 Hollenbeck Avenue Sunnyvale, CA 94087		
28. NAME OF SURVIVING SPOUSE—FIRST Alicia		29. MIDDLE -		30. LAST (MAIDEN NAME) Lee	
31. NAME OF FATHER—FIRST Raymond		32. MIDDLE -		33. LAST Inafuku	
34. BIRTH STATE Japan		35. NAME OF MOTHER—FIRST Lillian		36. MIDDLE -	
37. LAST (MAIDEN) Matsuda		38. BIRTH STATE Hawaii			
39. DATE MM/DD/CCYY 01/27/2000		40. PLACE OF FINAL DISPOSITION National Cemetery of The Pacific 2177 Puowaina Drive Honolulu, Hawaii 96813			
41. TYPE OF DISPOSITION(S) CR/TR/BU		42. SIGNATURE OF EMBALMER Not Embalmed		43. LICENSE NO. -	
44. NAME OF FUNERAL DIRECTOR Alameda Family Saratoga-Cupertino FH		45. LICENSE NO. FD1215		46. SIGNATURE OF LOCAL REGISTRAR <i>Martin Fenstersheib MD</i>	
47. DATE MM/DD/CCYY 01/25/2000					
101. PLACE OF DEATH El Camino Hospital		102. IF HOSPITAL, SPECIFY ONE: <input checked="" type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA		103. FACILITY OTHER THAN HOSPITAL <input type="checkbox"/> CONV. HOSP. <input type="checkbox"/> RES. CARE <input type="checkbox"/> OTHER	
104. COUNTY Santa Clara		105. STREET ADDRESS—(STREET AND NUMBER OR LOCATION) 2500 Grant Road		106. CITY Mountain View	
107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)		TIME INTERVAL BETWEEN ONSET AND DEATH		108. DEATH REPORTED TO CORNER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
IMMEDIATE CAUSE (A) Ventricular Fibrillation		7 Days		REFERRAL NUMBER	
DUE TO (B) Cardiomyopathy		Years		109. BIOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
DUE TO (C)				110. AUTOPSY PERFORMED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
DUE TO (D)				111. USED IN DETERMINING CAUSE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107					
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE.					
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 DECEASED LAST SEEN ALIVE MM/DD/CCYY 01/11/2000 01/18/2000		115. SIGNATURE AND TITLE OF CERTIFIER <i>[Signature]</i>		116. LICENSE NO. G045862	
117. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP Cesar R. Molina, M.D. 525 South Drive #119 Mountain View, CA 94040		118. DATE MM/DD/CCYY 01/20/2000			
119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED		120. INJURY AT WORK <input type="checkbox"/> YES <input type="checkbox"/> NO		121. INJURY DATE MM/DD/CCYY	
122. HOUR		123. PLACE OF INJURY		124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)	
125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP)					
126. SIGNATURE OF CORONER OR DEPUTY CORONER		127. DATE MM/DD/CCYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER	

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA REGISTRAR COUNTY OF SANTA CLARA SS DATE ISSUED By FAX AUTH. # CENSUS TRACT

H1233578

This is a true and exact reproduction of the document officially registered and placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF PUBLIC HEALTH.

01/25/2000

Martin D. Fenstersheib MD
MARTIN D. FENSTERSHEIB
HEALTH OFFICER AND LOCAL REGISTRAR
OF BIRTHS AND DEATHS

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

