

APN# 1220-24-701-061



00180123202410068290040049

SHAWNYNE GARREN, RECORDER

E03

Recording Requested by/Mail to:

Name: Allison MacKenzie, Ltd. _____

Address: 402 N. Division St. _____

City/State/Zip: Carson City, NV 89703 _____

Mail Tax Statements to:

Name: Peter M. Beekhof, Jr., Trustee _____

Address: 1901 Arabian Ln _____

City/State/Zip: Gardnerville, NV 89410 _____

Correction Deed

Title of Document (required)

Document # 2024-1005853 _____ is being (re-)recorded to correct;

Name of "grantor" by removing "Jr." Grantor didn't take title as a "Jr." _____

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

___ Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

___ Judgment – NRS 17.150(4)

___ Military Discharge- NRS 419.020(2)

Signature

Peter M. Beekhof Jr.

Printed Name

APN: 1220-24-701-061
RETURN RECORDED DEED TO:
CHRIS MacKENZIE, ESQ.
ALLISON MacKENZIE, LTD.
P.O. Box 646
Carson City, NV 89702

GRANTEE/MAIL TAX STATEMENTS TO:
Peter M. Beekhof, Jr.,
as Trustee of
The Peter M. Beekhof, Jr. Separate Property Trust
1901 Arabian Ln.
Gardnerville, NV 89410

The party executing this document hereby affirms
that this document submitted for recording does
not contain the social security number of any
person or persons pursuant to NRS 239B.030.

CORRECTION DEED
GRANT, BARGAIN AND SALE DEED

THIS INDENTURE, made on April 18, 2024, by and
between PETER M. BEEKHOF, a married man as his sole and separate property who acquired
title as PETER M. BEEKHOF, an unmarried man, "grantor" and PETER M. BEEKHOF, JR.,
Trustee of THE PETER M. BEEKHOF, JR. SEPARATE PROPERTY TRUST "grantee".

WITNESSETH:

That the grantor, for good and valuable consideration paid by the grantee, the
receipt whereof is hereby acknowledged, does by these presents grant, bargain, and sell to the
grantee, and to their successors and assigns, all that certain parcel of real property located in
Douglas County, state of Nevada, and more particularly described as follows:

Parcel 3 of PARCEL MAP LDA 15-017 FOR WEST RIDGE
HOMES, INC., according to the map thereof, filed in the office of
the County Recorder of Douglas County, State of Nevada on July
18, 2016, as File No. 2016-884554.

APN: 1220-24-701-061

TOGETHER WITH all and singular the tenements, hereditaments, and appurtenances thereunto belonging or in anywise appertaining, and the reversion and reversions, remainder or remainders, rents, issues, and profits thereof.

TO HAVE AND TO HOLD all and singular the premises, together with the appurtenances, unto the said grantee and to their successors and assigns forever.

IN WITNESS WHEREOF, the grantor has executed this conveyance the day and year first above written.



PETER M. BEEKHOF

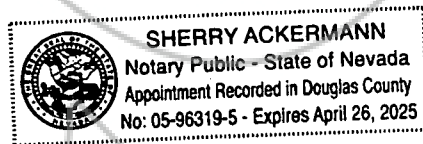
STATE OF NEVADA)
Douglas): ss.
CARSON CITY)

On 4-16-2024, 2024, personally appeared before me, a Notary Public, PETER M. BEEKHOF, who acknowledged that he executed the above instrument.



NOTARY PUBLIC

4858-9599-1218, v. 1



STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: _____

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

1. Assessor Parcel Number (s)
 (a) 1220-24-701-001
 (b) _____
 (c) _____
 (d) _____

2. Type of Property:

a) <input type="checkbox"/> Vacant Land	b) <input checked="" type="checkbox"/> Single Fam Res.
c) <input type="checkbox"/> Condo/Twnhse	d) <input type="checkbox"/> 2-4 Plex
e) <input type="checkbox"/> Apt. Bldg.	f) <input type="checkbox"/> Comm'l/Ind'l
g) <input type="checkbox"/> Agricultural	h) <input type="checkbox"/> Mobile Home
i) <input type="checkbox"/> Other	

3. Total Value/Sales Price of Property:

Deed in Lieu of Foreclosure Only (value of property) \$ _____

Transfer Tax Value: \$ _____

Real Property Transfer Tax Due: \$ _____

4. If Exemption Claimed:

a. Transfer Tax Exemption, per NRS 375.090, Section: 3

b. Explain Reason for Exemption: Removing IR from Grantor Name

5. Partial Interest: Percentage being transferred: _____ %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, that the information provided is correct to the best of their information and belief, and can be supported by documentation if called upon to substantiate the information provided herein. Furthermore, the disallowance of any claimed exemption, or other determination of additional tax due, may result in a penalty of 10% of the tax due plus interest at 1 % per month.

Pursuant to NRS 375.030, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature [Signature] Capacity Grantor

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
 (REQUIRED)

Print Name: Peter Reikhsfelja

Address: 1901 Arabian Lane

City: Carlinville

State: NV Zip: 89410

BUYER (GRANTEE) INFORMATION
 (REQUIRED)

Print Name: _____

Address: _____

City: SAME

State: _____ Zip: _____

COMPANY/PERSON REQUESTING RECORDING (REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: _____ Escrow # _____

Address: _____

City: _____ State: _____ Zip: _____