

SEE EXHIBIT A

4. We, Michonne R. Ascuaga, Camille M. Bressler, and Stephen R. Ascuaga, are the Successor Co-Trustees of The John J. Ascuaga Family Trust under agreement dated January 8, 1988, amended and restated by The John J. Ascuaga Family Trust Agreement (As Restated) dated December 14, 2005 and any amendments thereto, which was in effect at the time of the death of the decedents identified in paragraphs 1 and 2 above, and which Trust has not been revoked, and we hereby consent to act as such.

5. There are no federal estate taxes due as a result of the death of the decedents identified hereinabove.

We declare under penalty of perjury that the foregoing is true and correct.

DATED this 23rd day of July, 2024.

The John J. Ascuaga Family Trust

By Michonne R. Ascuaga
Michonne R. Ascuaga, Co-Trustee

By Camille M. Bressler
Camille M. Bressler, Co-Trustee

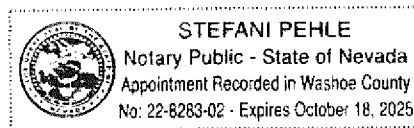
By Stephen R. Ascuaga
Stephen R. Ascuaga, Co-Trustee

STATE OF NEVADA)
) ss
COUNTY OF WASHOE)

Subscribed and sworn to (or affirmed) before me on this 23rd day of July 2024, by Michonne R. Ascuaga, in her capacity as Co-Trustee of The John J. Ascuaga Family Trust, who proved to me on the basis of satisfactory evidence to the person who appeared before me.

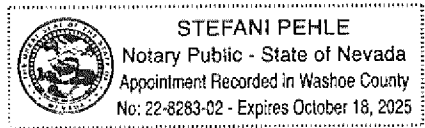
WITNESS my hand and official seal.

Signature Stefani Pehle



[NOTARY TO FOLLOW]

STATE OF NEVADA)
) SS
COUNTY OF WASHOE)



Subscribed and sworn to (or affirmed) before me on this 23rd day of July, 2024, by **Camille M. Bressler**, in her capacity as **Co-Trustee of The John J. Ascuaga Family Trust**, who proved to me on the basis of satisfactory evidence to the person who appeared before me.

WITNESS my hand and official seal.

Signature Stefani Pehle

STATE OF NEVADA)
) SS
COUNTY OF WASHOE)



Subscribed and sworn to (or affirmed) before me on this 23rd day of July, 2024, by **Stephen R. Ascuaga**, in his capacity as **Co-Trustee of The John J. Ascuaga Family Trust**, who proved to me on the basis of satisfactory evidence to the person who appeared before me.

WITNESS my hand and official seal.

Signature Stefani Pehle

STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
VITAL STATISTICS

CASE FILE NO. 4181390

CERTIFICATE OF DEATH

2020026863
STATE FILE NUMBER

TYPE OR
PRINT IN
PERMANENT
BLACK INK

IF DEATH
OCCURRED IN
INSTITUTION SEE
HANDBOOK
REGARDING
COMPLETION OF
RESIDENCE
ITEMS

PARENTS

DISPOSITION

TRADE CALL

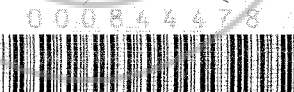
CERTIFIER

REGISTRAR

CAUSE OF
DEATH

CONDITIONS IF
ANY WHICH
GAVE RISE TO
IMMEDIATE
CAUSE
STATING THE
UNDERLYING
CAUSE LAST

1a. DECEASED-NAME (FIRST,MIDDLE,LAST,SUFFIX) Rosie Louise ASCUAGA		2. DATE OF DEATH (Mo/Day/Year) November 28, 2020		3a. COUNTY OF DEATH Douglas	
3b. CITY, TOWN, OR LOCATION OF DEATH Carson City		3c. HOSPITAL OR OTHER INSTITUTION -Name(If not either, give street number) 150 Jacks Valley Ranch Rd		3e.If Hosp. or Inst. Indicate DOA,OP/Emer. Rm. Inpatient(Specify) Home	
4. SEX Female		7a. AGE-Last birthday (Years) 86		8. DATE OF BIRTH (Mo/Day/Yr) December 06, 1933	
5. RACE (Specify) White		6. Hispanic Origin? Specify No - Non-Hispanic		7b. UNDER 1 YEAR MOS	
9a. STATE OF BIRTH (If not US/CA, name country) Nevada		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 16	
11. MARITAL STATUS (Specify) Married		12. SURVIVING SPOUSE'S NAME (Last name prior to first marriage) John J ASCUAGA		13. SOCIAL SECURITY NUMBER ██████████-8402	
14a. USUAL OCCUPATION (Give Kind of Work Done During Most of)		14b. KIND OF BUSINESS OR INDUSTRY OWN HOME		15a. INSIDE CITY LIMITS (Specify Yes or No) No	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Douglas		15c. CITY, TOWN OR LOCATION Carson City	
15d. STREET AND NUMBER 150 Jacks Valley Ranch Rd		16. FATHER/PARENT - NAME (First Middle Last Suffix) Jean Leon ARDANS		17. MOTHER/PARENT - NAME (First Middle Last Suffix) Marie Louise HARRIET	
18a. INFORMANT- NAME (Type or Print) Michonne ASCUAGA		18b. MAILING ADDRESS (Street or R.F.D. No. City or Town, State, Zip) 695 Juniper Hill Rd Reno, Nevada 89519			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Burial		19b. CEMETERY OR CREMATORY - NAME Genoa Cemetery		19c. LOCATION City or Town State Genoa Nevada	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) JAMES P SMOLENSKI SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE NUMBER FD217		20c. NAME AND ADDRESS OF FACILITY Waltons Funerals & Cremations-Chapel of the Valley 1281 N Roop Carson City NV 89706	
TRADE CALL - NAME AND ADDRESS					
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) DENVER J MILLER MD SIGNATURE AUTHENTICATED			22a. On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title)		
21b. DATE SIGNED (Mo/Day/Yr) December 04, 2020		21c. HOUR OF DEATH 23:33		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22c. HOUR OF DEATH		22d. PRONOUNCED DEAD (Mo/Day/Yr)	
21e. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22e. PRONOUNCED DEAD AT (Hour)		23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Denver J Miller MD 5538 Longley Lane Reno, NV 89511	
23b. LICENSE NUMBER 7330		24a. REGISTRAR (Signature) BLAISE SATARIANO SIGNATURE AUTHENTICATED		24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) December 04, 2020	
24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).) PART I			
(a) Acute Cardiopulmonary Arrest		Interval between onset and death		Minutes	
(b) Hypoxia		Interval between onset and death		Minutes	
(c) Congestive Heart Failure		Interval between onset and death		Weeks	
(d) Senile Degeneration Of The Brain Not Elsewhere Classified		Interval between onset and death		Months	
PART II: OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1.				26. AUTOPSY (Specify Yes or No) No	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No		28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)		28b. DATE OF INJURY (Mo/Day/Yr)	
28c. HOUR OF INJURY		28d. DESCRIBE HOW INJURY OCCURRED			
28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY- At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE	



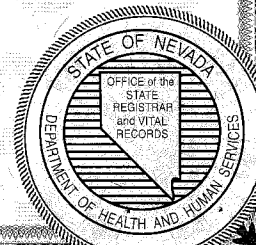
CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED: **12/22/2020**

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

Blaise Satariano
STATE REGISTRAR



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

STATE OF NEVADA
CERTIFICATION OF VITAL RECORD

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
VITAL STATISTICS

CASE FILE NO. 4221030

CERTIFICATE OF DEATH

2021015228
STATE FILE NUMBER

TYPE OR
PRINT IN
PERMANENT
BLACK INK

DECEDENT

IF DEATH
OCCURRED IN
INSTITUTION SEE
HANDBOOK
REGARDING
COMPLETION OF
RESIDENCE
ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

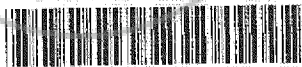
REGISTRAR

CAUSE OF
DEATH

CONDITIONS IF
ANY WHICH
GAVE RISE TO
IMMEDIATE
CAUSE
STATING THE
UNDERLYING
CAUSE LAST

1a. DECEASED-NAME (FIRST,MIDDLE, LAST,SUFFIX) John J ASCUAGA		2. DATE OF DEATH (Mo/Day/Year) June 28, 2021		3a. COUNTY OF DEATH Douglas	
3b. CITY, TOWN, OR LOCATION OF DEATH Carson City		3c. HOSPITAL OR OTHER INSTITUTION -Name(if not either, give street and number) 150 Jacks Valley Ranch Rd		3e. if Hosp. or Inst. indicate COA, OP/Ermer. Rm. Inpatient!(Specify) Home	
5. RACE (Specify) White		6. Hispanic Origin? Specify No - Non-Hispanic		7a. AGE-Last birthday (Years) 96	
7b. UNDER 1 YEAR MOS		7c. UNDER 1 DAY DAYS		7d. UNDER 1 DAY HOURS	
7e. UNDER 1 DAY MIN		8. DATE OF BIRTH (Mo/Day/Yr) January 07, 1925			
9a. STATE OF BIRTH (if not US/CA, name country) Idaho		9b. CITIZEN OF WHAT COUNTRY United States		10. EDUCATION 16	
11. MARITAL STATUS (Specify) Widowed		12. SURVIVING SPOUSE'S NAME (Last name prior to first marriage)			
13. SOCIAL SECURITY NUMBER 5155		14a. USUAL OCCUPATION (Give Kind of Work Done During Most of)		14b. KIND OF BUSINESS OR INDUSTRY HOTEL/CASINO	
15a. RESIDENCE - STATE Nevada		15b. COUNTY Douglas		15c. CITY, TOWN OR LOCATION Carson City	
15d. STREET AND NUMBER 150 Jacks Valley Ranch Rd		15e. INSIDE CITY LIMITS (Specify Yes or No) No		15f. Ever in US Armed Forces? Yes	
16. FATHER/PARENT - NAME (First Middle Last Suffix) Jose ASCUAGA			17. MOTHER/PARENT - NAME (First Middle Last Suffix) Marina EQUILUZ		
18a. INFORMANT- NAME (Type or Print) Michonne ASCUAGA		18b. MAILING ADDRESS (Street or R.F.D. No, City or Town, State, Zip) 695 Juniper Hill Rd Reno, Nevada 89519			
19a. BURIAL, CREMATION, REMOVAL, OTHER (Specify) Burial		19b. CEMETERY OR CREMATORY - NAME Genoa Cemetery		19c. LOCATION City or Town State Genoa Nevada	
20a. FUNERAL DIRECTOR - SIGNATURE (Or Person Acting as Such) JAMES P SMOLENSKI SIGNATURE AUTHENTICATED		20b. FUNERAL DIRECTOR LICENSE NUMBER FD217		20c. NAME AND ADDRESS OF FACILITY Waltons Funerals & Cremations-Chapel of the Valley 1281 N Roop Carson City NV 89706	
TRADE CALL - NAME AND ADDRESS					
21a. To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title) JEFFREY BASA MD SIGNATURE AUTHENTICATED			22a. On the basis of examination and/or investigation, in my opinion, death occurred at the time, date and place and due to the cause(s) stated. (Signature & Title)		
21b. DATE SIGNED (Mo/Day/Yr) June 29, 2021		21c. HOUR OF DEATH 04:26		22b. DATE SIGNED (Mo/Day/Yr)	
21d. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22c. HOUR OF DEATH		22d. PRONOUNCED DEAD (Mo/Day/Yr)	
22e. PRONOUNCED DEAD AT (Hour)		23a. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, ATTENDING PHYSICIAN, MEDICAL EXAMINER, OR CORONER) (Type or Print) Dr. Jeffrey Basa MD 2874 N. Carson Street, Ste 200 Carson City, NV, 89706			
23b. LICENSE NUMBER 8079		24a. REGISTRAR (Signature) SHANA B RHINEHART SIGNATURE AUTHENTICATED			
24b. DATE RECEIVED BY REGISTRAR (Mo/Day/Yr) June 30, 2021		24c. DEATH DUE TO COMMUNICABLE DISEASE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
25. IMMEDIATE CAUSE (ENTER ONLY ONE CAUSE PER LINE FOR (a), (b), AND (c).)					
PART I					
(a) Lung Cancer Interval between onset and death					
DUE TO, OR AS A CONSEQUENCE OF:					
(b) Unknown Etiology Interval between onset and death					
DUE TO, OR AS A CONSEQUENCE OF:					
(c) Interval between onset and death					
DUE TO, OR AS A CONSEQUENCE OF:					
(d) Interval between onset and death					
PART II OTHER SIGNIFICANT CONDITIONS-Conditions contributing to death but not resulting in the underlying cause given in Part 1.				26. AUTOPSY (Specify Yes or No) No	
27. WAS CASE REFERRED TO CORONER (Specify Yes or No) No		28a. ACC., SUICIDE, HOM., UNDET. OR PENDING INVEST. (Specify)			
28b. DATE OF INJURY (Mo/Day/Yr)		28c. HOUR OF INJURY		28d. DESCRIBE HOW INJURY OCCURRED	
28e. INJURY AT WORK (Specify Yes or No)		28f. PLACE OF INJURY- At home, farm, street, factory, office building, etc. (Specify)		28g. LOCATION STREET OR R.F.D. No. CITY OR TOWN STATE	

000878392



CERTIFIED COPY OF VITAL RECORDS

This is a true and exact reproduction of the document officially registered and placed on file in the office of the State Registrar and Vital Records.

DATE ISSUED: 7/2/2021

Shana Rhinehart
STATE REGISTRAR

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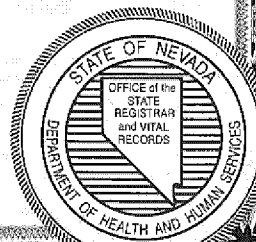
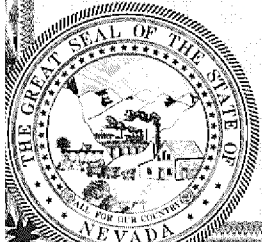


EXHIBIT A

LEGAL DESCRIPTION

The land referred to herein is situated in the State of Nevada, County of Douglas, in the City of Carson City, and described as follows:

PARCEL1:

All that real property situate in the County of Douglas, State of Nevada, described as follows:

A parcel of land lying within Sections 9, 14, 15, 16, 21, 22, & 23, Township 14 North, Range 19 East, Mount Diablo Meridian, more particularly described as follows:

BEGINNING at the northwest corner of said Section 15, a found 2" iron pipe at a fence corner; thence along the north line of said Section 15, along an existing fence, North $89^{\circ}27'44''$ East, 2,660.07 feet to an existing fence corner;

thence continuing along an existing fence, South $00^{\circ}07'27''$ West, 3,152.46 feet to an existing fence corner;

thence continuing along an existing fence, North $71^{\circ}05'54''$ East, 2,831.45 feet to an existing fence corner;

thence continuing along an existing fence, North $00^{\circ}39'24''$ West, 936.76 feet to an existing fence corner;

thence along a line coincident with the southerly line of Alpine View Estates No. 3 filed for record April 16, 1973 as Document No. 65319 and its westerly extension thereof, North $89^{\circ}25'44''$ East, 1,664.47 feet to a point on the westerly line of an 80-foot wide (80) Jack's Valley Road;

thence along said westerly line of Jack's Valley Road the following courses:

South $15^{\circ}65'37''$ West, 1,367.16 feet;

Along the arc of a curve to the left, having a radius of 3,540.00 feet, central angle of $18^{\circ}26'07''$ and arc length of 1,139.01 feet;

South $02^{\circ}30'30''$ East, 1,537.61 feet;

Along the arc of a curve to the right, having a radius of 4,960.00 feet, central angle of $04^{\circ}33'09''$ and arc length of 394.10 feet;

South $02^{\circ}02'39''$ West, 919.70 feet to a point on the south line of the northwest one-quarter of the northwest one-quarter (NW1/4NW1/4) of said Section 23;

EXHIBIT A

LEGAL DESCRIPTION - CONTINUED

thence along said south line, South 89°45'55" West, 1,212.55 feet;

thence along the south line of the north one-half of the northeast one-quarter (N1/2NE1/4) of said Section 22, South 89°10'47" West, 2,652.36 feet;

thence along the south line of the north one-half of the northwest one-quarter (N1/2NW1/4) of said Section 22, South 89°10'47" West, 2,643.70 feet;

thence along the south line of the northeast one-quarter of the northeast one-quarter (NE1/4NE1/4) of said Section 21, South 89°25'58" West, 1,304.23 feet to the southwest corner of said NE1/4NE1/4;

thence along the west line of said NE1/4NE1/4, North 00°04'08" West, 1,320.70 feet to the northwest corner of said NE1/4NE1/4;

thence along the north line of the northeast one-quarter (NE 1/4) of said Section 21, South 89°15'58" West, 1,305.74 feet to the north one-quarter (N1/4) corner of said Section 21;

thence along the center section line of said Section 16, North 00°01'18" West, 5,296.72 feet to the north one-quarter (N1/4) corner of said Section 16;

thence along the center section line of said Section 9, North 00°04'52" West, 1,304.72 feet to a found 5/8" rebar and plastic cap, PLS 6497;

thence North 89°04'16" East, 2,615.01 feet to a point on the east line of said Section 9, a found 5/8" rebar and plastic cap, PLS 8659;

thence along said east line of Section 9, South 00°14'03" West, 766.89 feet;

thence North 89°45'57" West, 217.80 feet;

thence South 00°14'03" West, 200.00 feet;

thence South 89°45'57" East, 217.80 feet to a point on said east line of Section 9;

thence along said east line of Section 9, South 00°14'03" West, 340.00 feet to the POINT OF BEGINNING.

EXCEPTING THEREFROM a parcel of land lying within Sections 15 & 16, Township 1-North, Range 19 East, Mount Diablo Meridian, more particularly described as follows:

EXHIBIT A

LEGAL DESCRIPTION - CONTINUED

BEGINNING at the northwest corner of said Section 15, a found 2" iron pipe at a fence corner;

thence along the north line of said Section 15, along an existing fence, North 89°27'44" East, 238.71 feet;

thence South 00°32'16" East, 579.61 feet;

thence South 89°27'44" West, 243.53 feet;

thence South 00°03'39" East, 877.60 feet;

thence South 73°53'16" West, 397.71 feet;

thence South 63°36'53" West, 461.23 feet;

thence North 00°46'21" West, 1,760.13 feet to a point on the north line of said Section 16;

thence along said north line of Section 16, North 89°06'58" East, 817.55 feet to the POINT OF BEGINNING.

The above legal description appeared previously in that certain Document Recorded, 04/26/2017, 2017 as Document No. 897836 and Re-Recorded, 05/24/2017, as Document No. 899067, of official Records, pursuant to NRS Section 6. NRS 111.312.

Assessor's Parcel No. 1419-00-001-039