| RPTT: | _1,30 |
|-------|--------------------|
| | 003-191 <u>-03</u> |

181412 QUIT CLAIM DEED

| (Robin Richards) | NTOR(S) EUREKA COUNTY TREASURER, TRUSTEE for and in consideration of |
|--|--|
| Seven hundred fifty and 00/100 | Dollars (\$ 750 00) do hereby QUIT CLAIM the right, title |
| and interest, if any, which GRANTOR may have in all | I that real property, the receipt of which is hereby acknowledged, |
| to the GRANTEE(S): | |
| Smile 4U Inc | whose street address is |
| (if applicable): PO Box 101 | , situate in the City |
| of Lynden , County of | , State of <u>Washington</u> |
| All that certain property in the County of Eureka, State | e of Nevada bounded and described as follows |
| (Set forth legal description) | |
| LOT 41, NEVELCO INC. UNIT #1 | |
| Together with all and singular hereditament and appear | urtenances thereunto belonging or in any way appertaining to |
| In Witness Whereof, I/We have hereunto set my hand/ | our hands on March 19, 2003 |
| Signature of Grantor Frances E. Gale, Eureka County Treasurer | |
| STATE OF NEVADA | |
| This instrument was acknowledged before me By (person(s) appearing before noises) public) | on (date) Diarch 19,2003 Kances & Dale |
| Nøtary Public Ny Commission expires 7-10-3006 | GLADY GOICOECHEA Notary Public - State of Novada Appointment Recorded in Eureka County No 94-0329 8 Expires July 10 2006 |
| RECORDING REQUESTED BY AND MAIL TAY STATEMENT TO | THIS SPACE FOR RECORDERS USE ONLY |
| Name Smile 4U Inc Address PO Box 101 | Sme 44 Dre 931: 720 1 19.53 |
| City/State/Zip 1 ynden, WA 98264 | C31; 20 ; 1 9. 33 |
| BOOK 3 | 159 MGE303 181412 |

STATE OF NEVADA DECLARATION OF VALUE

| 1. Assessor.P | garce} Number (s) | | • | Document/Instrument /8/4/1 |
|-----------------------------------|--|-------------------------------|-----------------------------------|--|
| ,03-19 | 11-03 | | | Book. 359 Page 303 |
| b) | | _ | | Date of Recording 3 - 20 - 03 |
| c1 | | - | | Notes |
| (له | | - | | |
| 2 Tunant De | anerbe | | | |
| 2. Type of Pro | operty: Vac≃nt Land | ы | Single Fam Ri | es. |
| •i□ | Condo/Twnhse | 4) <u> </u> | 2-4 Plex | |
| e) 💢 | Apt. Bidg | n 🗀 | CommVind1 | |
| s) [] D [_] | Agnoultural Other | ۱» 🗀 | Mobile Home | |
| مـــا د | | | / | 00 |
| | ie/Sales Price of | | | \$ 150 |
| Deed in Lie | eu of Foreclosure C | | | S |
| Transfer Ta | x Value, | | / / | \$ |
| Real Proper | rty Transfer Tax Di | ne. | 1 1 | \$1,30 |
| A 14 F | on Claimad | | 1 | \ / / |
| 4 If Exemption | <u>on Claimed:</u> fer Tax Exemption, p | יבר אספ איר | 190 Same | \ / / |
| | rer vax Exemption, p n Reason for Exemp | | eso, escuen. | |
| | | | | / // / |
| E Dadio! | ract: Darassia | a house to | informad | \ |
| o. Paniai inte | erest: Percentage | e peing trai | ыепеа. | |
| belief, and can provided herei | i be supported by d n. Furthermore, th | iocumentatio le disallowan | on if called up nce of any cla | at to the best of their information and spon to substantials the information laimed exemption, or other determination a tax due plus interest at 1% per month. |
| Pursuant to N | IRS 375,030, the E | Buyer and S | eller shall h | be jointly and severally hable for any |
| additional am | 1 1 | . ^ | | and an arrang manager and |
| Signature | Frances | 10 lb - | | Capacity Treasurer |
| Signature | A LIFERAL SERVICES | | | |
| oranainie | 7 / / | | | Capacity |
| SELLER IC | RANTOR) INFO | RMATION | יוום ן | YER (GRANTECHNEODIATION |
| | RANTORTINEO | TON TON | | YER (GRANTEE) INFORMATION (REQUIRED) |
| Print Name: | Frances Gale | - | Print N | |
| Address: | P O Box 667 | 1 | – Addre | |
| City: | Eureka, NV 8 | 39316 | - City | |
| State: | Zip: | - v.a. <u>/</u> | State. | . Zıp |
| + = | | Λ. | - | |
| COMPANY | PERSON REQU | <u>IESTING</u> F | RECORDIN | <u>√G</u> |
| | OT THE SELLER OR BUY | 70. | | - |
| Print Name: | | | | Escrow# |
| Address: | / | / | | |
| City. | | | State: | Zip. |
| - | | | | · |

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)