

After recording please return to:

Smile4u, Inc  
PO Box 101  
Lynden, WA 98226  
APN: 005-180-034  
Mail Tax Statements to above

BOOK 363 PAGE 67-68  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
*Smile 4u Inc*  
2003 JUN 27 PM 1:19

DEED 182151  
EUREKA COUNTY NEVADA  
COUNTY CLERK  
RECORDED  
FEES 15<sup>00</sup>

For and in consideration paid undersigned, **Arthur E. O'Rear and Karen J. O'Rear, Husband and Wife as Joint tenants**, hereiter referred to as Grantor, hereby conveys all rights and title in the following described real estate to **Smile Inc**, hereinafter referred to as Grantee, legally described as:

**LEGAL DESCRIPTION:** Northwest quarter of the Northeast quarter of Section 35, Township 30 North, Range 48 East, N.B. & M.

Situate in the County of **Eura** in the state of Nevada.

The Grantor will defend the it and title to the real estate described above against claims against the Grantee arising from, under cthough the Grantor only.

The Grantee accepts the real ite in "as is" condition and where presently located including any improvements, structures, easents, or encumbrances. The Grantor makes no representation about the suitability of the real estate fo particular purpose or the conditions therein. The Grantee has had an opportunity for due diligence : is purchasing this property based on Grantee's judgment and inquiry.

If a court of competent juriscion finds any provision, clause, or section of this document to be illegal, invalid, or unenforceable as toy circumstance, that finding shall not make the offending provision, clause, or section illegal, invalid, or uforceable as to any other circumstance. If feasible the offending provision, clause, or section shall be covered modified so that it shall becomes legal, valid, and enforceable. If the offending provision, clause, cction cannot be so modified, it shall be considered deleted from this document. Unless otherwise tiured by law, the illegality, invalidity, or unenforceability of any provision, clause, or section this docum shall not affect the legality, validity, or enforceability of any other provision, clause, or section of this docent.

Dated this 20<sup>th</sup> day of JUNE, 2003.

X *[Signature]* X *Karen O'Rear*

STATE OF NEVADA

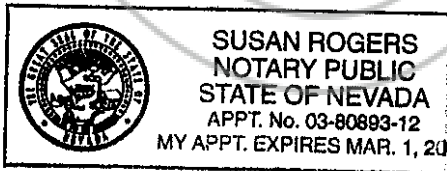
(INDIVIDUAL ACKNOWLEDGEMENT)

County of Lyon

I certify that I know or have sfactory evidence that Arthur E. O'Rear is the person who appeared before . and said person acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

Dated this 20<sup>th</sup> day of June, 2003.

*Susan Rogers*



Print Name Susan Rogers  
Notary Public in and for the State of Nevada  
My appointment expires: March 1, 2007

STATE OF NEVADA

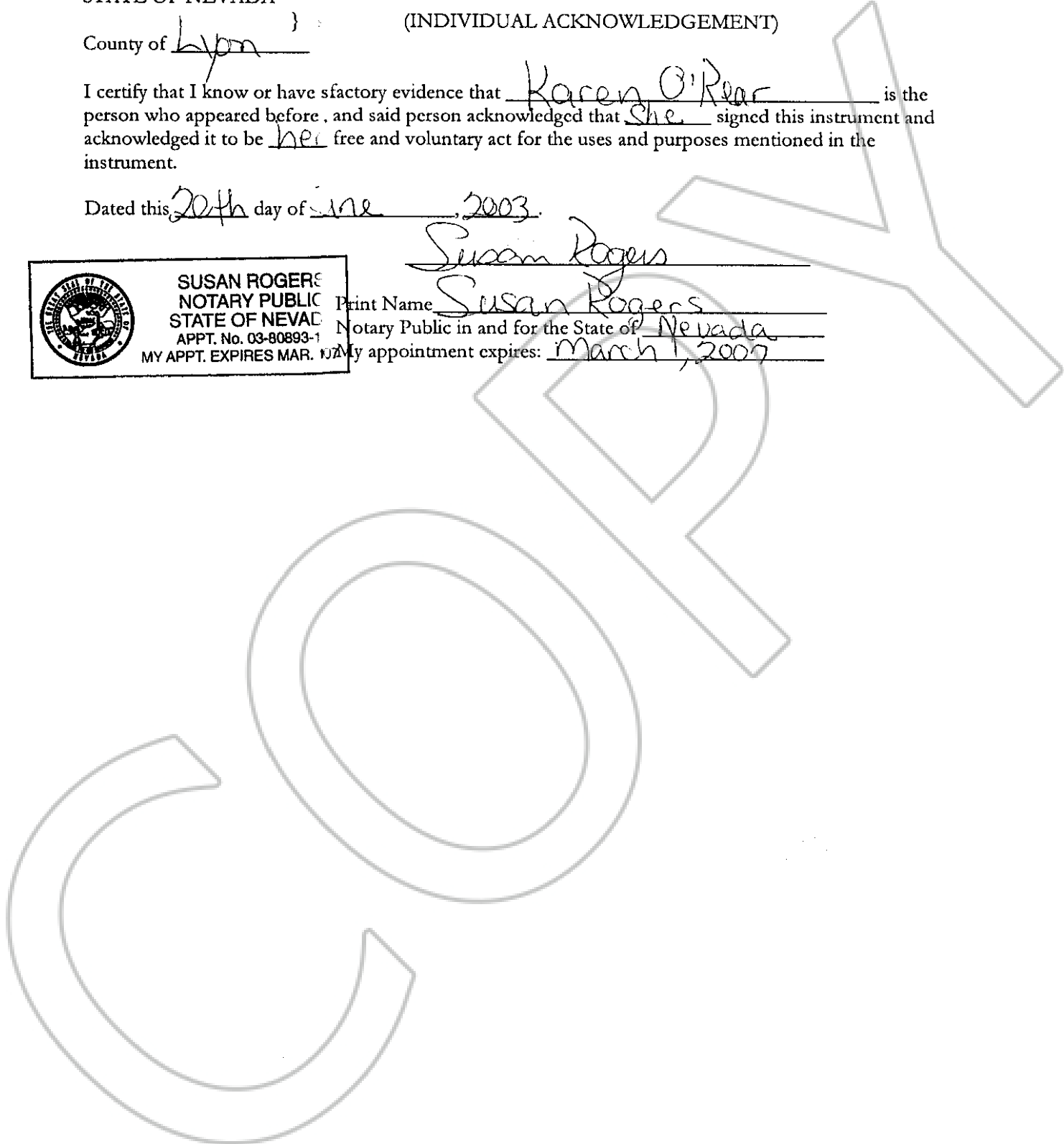
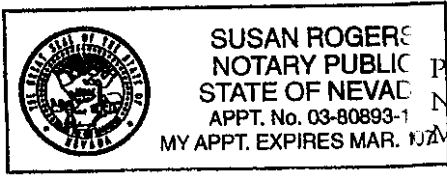
(INDIVIDUAL ACKNOWLEDGEMENT)

County of Lyon

I certify that I know or have satisfactory evidence that Karen O'Rear is the person who appeared before, and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated this 20th day of June, 2003.

Susan Rogers  
Print Name Susan Rogers  
Notary Public in and for the State of Nevada  
My appointment expires: March 1, 2009



**STATE OF NEVADA  
DECLARATION OF VALUE**

**1. Assessor Parcel Numb(s)**

a) 005-180-034  
 b) \_\_\_\_\_  
 c) \_\_\_\_\_  
 d) \_\_\_\_\_

**FOR RECORDERS OPTIONAL USE ONLY**

Document/Instrument # 182151  
 Book: 363 Page: 67-68  
 Date of Recording 6/27/03  
 Notes \_\_\_\_\_

**2. Type of Property:**

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

**3. Total Value/Sales Price Property:**

Deed in Lieu of Foreclosure Only (Value of Property) \_\_\_\_\_  
 Transfer Tax Value: \_\_\_\_\_  
 Real Property Trans Tax Due: \_\_\_\_\_

\$ 3000.00  
 \$ \_\_\_\_\_  
 \$ 3.90  
 \$ 3.90

**4. If Exemption Claimed:**

- a) Transfer Tax Exemption, per NRS 375.090, Section: \_\_\_\_\_  
 b) Explain Reason Exemption: \_\_\_\_\_

Partial Interest: Percentage being transferred: 100 %

The undersigned declares and acknowledges, under penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, the information provided is correct to the best of their information 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 375.010, the Buyer and Seller shall be jointly and severally liable for any additional amount owed.

Signature [Signature] Karen O'Rea Capacity seller

Signature [Signature] Capacity Buyer

SELLER (GRANTOR) INFORMATION (REQUIRED)		BUYER (GRANTEE) INFORMATION (REQUIRED)	
Print Name:	<u>Arthur + Karen J. O'Rea</u>	Print Name:	<u>Smiley W, Inc</u>
Address:	<u>18 N. 1st Street</u>	Address:	<u>10000 101</u>
City:	<u>Verdon</u>	City:	<u>Lynden</u>
State:	<u>NV</u> Zip: <u>89447</u>	State:	<u>WA</u> Zip: <u>98264</u>

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

Print Name: \_\_\_\_\_ Escrow # \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)