

APN: 005-230-02
Recording Requested by:
Smile4u, Inc
PO Box 888
Lynden, WA 98264
Mail Tax Statements to above

BOOK 364 PAGE 264-265
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Smile4u Inc
2003 AUG 19 PM 2:25

EUREKA COUNTY NEVADA
M.N. REBALEATI, RECORDER
FILE NO. FEES 15.00

DEED

182334

For and in consideration patne undersigned, **Arthur J. Hood and Virginia F. Hood, Trustees of the Hood Family Trust, u.a.d.uary 28, 1993 (Grantees)**, hereinafter referred to as Grantor, hereby conveys all rights and title in following described real estate to **Smile4u, Inc**, hereinafter referred to as Grantee, legally described as

LEGAL DESCRIPTION: *wnship 30 North, Range 48 East, MDB&M Section 27: NE1/4 NW1/4 NW1/4 & SE1/4 NW1/4 T1/4 (or the East 1/2 of the NW1/4 of the NW1/4 of Section 27)*

Situate in the County of **Eun** 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 though the Grantor only.

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

If a court of competent jurisdiction finds any provision, clause, or section of this document to be illegal, invalid, or unenforceable as any circumstance, that finding shall not make the offending provision, clause, or section illegal, invalid, or unforceable as to any other circumstance. If feasible the offending provision, clause, or section shall be codeder modified so that it shall becomes legal, valid, and enforceable. If the offending provision, clause, ection cannot be so modified, it shall be considered deleted from this document. Unless otherwise tured 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 11 day of AUGUST

Virginia F. Hood, Trustee x *Arthur J. Hood, Trustee*

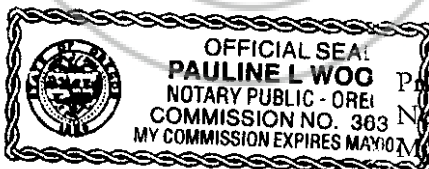
STATE OF OREGON

(INDIVIDUAL ACKNOWLEDGEMENT)

County of Law

I certify that I know or have sfactory evidence that Arthur J. Hood is the person who appeared before, and said person acknowledged that he signed this instrument and acknowledged it to be h free and voluntary act for the uses and purposes mentioned in the instrument.

Dated this 11 day of AUGUST, 2003.



Pauline L. Woods

Print Name PAULINE L. Woods
Notary Public in and for the State of Oregon
My appointment expires: 05/07/2007

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STATE OF OREGON

(INDIVIDUAL ACKNOWLEDGEMENT)

County of Texas

I certify that I know or have satisfactory evidence that VIRGINIA F. Hood is the person who appeared before me, 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 11 day of AUGUST, 2003

Pauline L. Woods

Print Name Pauline L. Woods

Notary Public in and for the State of Oregon

My appointment expires: 05/06/07



**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessor Parcel Number(s):
a) 005-230-02
b) _____
c) _____
d) _____
2. Type of Property:
a) ☒ Vacant Land b) ☐ Single Fam. Res.
c) ☐ Condo/Twnhse d) ☐ 4 Plex
e) ☐ Apt. Bldg f) ☐ Comm'l/Ind'l
g) ☐ Agricultural h) ☐ Mobile Home
i) ☐ Other
3. Total Value/Sales Price of Property: \$ 1,200.00
Deed in Lieu of Foreclosure Or value of property) (_____)
Transfer Tax Value: \$ 2.60
Real Property Transfer Tax: \$ 2.60

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument #: 182,334
Book 364 Page: 264-265
Date of Recording: 8/19/03
Notes: _____

4. If Exemption Claimed:

- a. Transfer Tax Exemption NRS 375.090, Section _____
b. Explain Reason for Exemption: _____

5. Partial Interest: Percentage being transferred: 100 %

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 Sherril Sedon Capacity Buyer
Signature _____ Capacity _____

**SELLER (GRANTOR) INFORMATION
(REQUIRED)**

Print Name: Arthur + Virginia Hood
Address: PO Box 557
City: Charleston
State: OR Zip: 7420

**BUYER (GRANTEE) INFORMATION
(REQUIRED)**

Print Name: Smiley, Inc
Address: PO Box 888
City: Lynden
State: WA Zip: 98264

COMPANY/PERSON REQUESTING RECORDING (required if not seller or buyer)

Print Name: _____ Escrow # _____
Address: _____
City: _____ State: _____ Zip: _____

(A PUBLIC RECORD THIS FORM MAY BE RECORDED)