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OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Smile4u, Inc
2003 OCT 20 PM 3:33

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

182932

FEES 14⁰⁰

APN: 005-230-02
Recording Requested by:
David Smith
Beverly Joseph
PO Box 1527
Prineville, OR 97754
Mail tax statements to above

DEED

For and in consideration the undersigned, **Smile4u, Inc.**, hereinafter referred to as Grantor, hereby conveys all rights and title in the following described real estate to **David Smith and Beverly Joseph**, hereinafter referred to as Grantee, legally described as:

LEGAL DESCRIPTION: 005-230-02, Township 30 North, Range 48 East, M.D.B.&M. Section 27: E2NW4NW4

Situate in the County of ~~Eua~~ in the state of Nevada

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

The Grantee accepts the real estate in "as is" condition and where presently located including any improvements, structures, cements, or encumbrances. The Grantor makes no representation about the suitability of the real estate for any particular purpose or the conditions therein. The Grantee has had an opportunity for due diligence and 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 unenforceable as to any other circumstance. If feasible the offending provision, clause, or section shall be reworded modified so that it shall become legal, valid, and enforceable. If the offending provision, clause, or section cannot be so modified, it shall be considered deleted from this document. Unless otherwise required by law, the illegality, invalidity, or unenforceability of any provision, clause, or section of this document shall not affect the legality, validity, or enforceability of any other provision, clause, or section of this document.

Witness my hand this 17th day of September, 2003.

Mark Abbott

Acknowledgment - Corporate

State of Washington
County of Whatcom

The foregoing instrument was acknowledged before me this 17th day of September, 2003 by Mark Abbott, President of Smu, Inc., a Washington corporation on behalf of the said corporation.

Sherry Svedin

Notary Public

My Commission Expires: 4-2-07



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**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) ☐ 2-4 Plex
e) ☐ Apt. Bldg f) ☐ Comm'l/Ind'l
g) ☐ Agricultural h) ☐ Mobile Home
i) ☐ Other

3. Total Value/Sales Price of Property: \$ 2,408.00
Deed in Lieu of Foreclosure (value of property) _____
Transfer Tax Value: \$ 3.25 9.75
Real Property Transfer Tax: \$ 3.25 9.75

FOR RECORDERS OPTIONAL USE ONLY

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Date of Recording: 10/20/03

Notes: _____

4. If Exemption Claimed:

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

5. Partial Interest: Percentage transferred: 100 %

The undersigned declarant 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 filed 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: David Smith

Capacity: seller

Signature: Beverly Joseph

Capacity: Buyer

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

Print Name: SMILEY INC
Address: PO Box 88
City: LYND
State: WA Zip: 98264

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

Print Name: David Smith + Beverly Joseph
Address: PO Box 1527
City: Prineville
State: OR Zip: 97754

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

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