

# QUITCLAIM DEED

BOOK 430 PAGE 153  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
*American Dream Lands*  
2005 DEC 27 AM 10:15

APN: 005-300-09

Mail tax statements to:  
Name: Stephen and Barbara Teklinski  
Address: 17664 44<sup>th</sup> PL. N.  
City/State/Zip: Loxahatchee, FL 33470

EUREKA COUNTY, NEVADA  
M.N. REBALEATI, RECORDER  
FILE NO. **202967**  
FEES 14.00

**THIS QUITCLAIM DEED**, Executed this 9<sup>th</sup> day of December 2005,

by first party, American Dream Lands LLC,

whose post office address is, 1712, Flagstaff, AZ 86002

to second party, Stephen R. Teklinski and Barbara Teklinski

whose mailing address is, 17664 44<sup>th</sup> PL. N., Loxahatchee, FL 33470

**WITNESSETH**, That the said first party, for good consideration and for the sum of \$ ten dollars (\$10.00) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel(s) of land, and improvements and appurtenances thereto in the County of Eureka, State of Nevada, to wit:

The East half (E1/2); The South half (S1/2) of the West half (W1/2) of Lot 1 and all of Lot 2 of Section 7, Township 30 North, Range 49 East, Mount Diablo Base and Meridian.

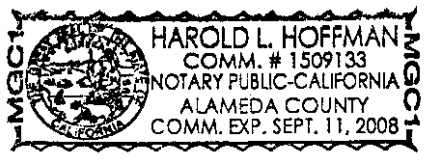
**IN WITNESS WHEREOF**, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

American Dream Lands LLC  
By: Joseph Zilfi, Managing Member *Joseph Zilfi*  
Joseph Zilfi

*California Hill*  
STATE OF ARIZONA  
COUNTY OF COCONINO, *Ala Vista*

On the 13<sup>th</sup> of Dec 2005, personally appeared American Dream Lands LLC by Joseph Zilfi, managing member the signer of the within instrument, who duly acknowledged to me that he executed the same.

Signature of Notary *Harold L. Hoffman*  
**HAROLD L. HOFFMAN**



**202967**

# State of Nevada Declaration of Value

FOR RECORDERS OPTIONAL USE ONLY	
Document/Instrument #	<u>202967</u>
Book:	<u>430</u> Page: <u>153</u>
Date of Recording:	<u>12/27/05</u>
Notes:	_____

1. Assessor Parcel Number(s)  
 a) ~~005-300-09~~ 005-300-09  
 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: \$ 19,425.00  
 Deed in Lieu of Foreclosure Only (value of property) \$ \_\_\_\_\_  
 Transfer Tax Value per NRS 375.010, Section 2: \$ \_\_\_\_\_  
 Real Property Transfer Tax Due: \$ 76.05

4. **If Exemption Claimed:**  
 a. Transfer Tax Exemption, per NRS 375.090, Section: \_\_\_\_\_  
 b. Explain Reason for Exemption: \_\_\_\_\_  
 \_\_\_\_\_

5. Partial Interest: Percentage being transferred: \_\_\_\_\_ %

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 [Signature] Capacity Seller  
 Signature \_\_\_\_\_ Capacity \_\_\_\_\_

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

Print Name: American Dream Lands LLC  
 Address: PO Box 1712  
 City: Flagstaff  
 State: AZ Zip: 86002

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

Print Name: Stephen and Barbara Teklinski  
 Address: 17664 44th PL. N.  
 City: Loxahatchee  
 State: FL Zip: 33470

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

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