

BOOK 435 PAGE 53-58
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
SB Grant + EB Franklin LLC
2006 APR 17 PM 3:07

APN # 002-042-06

Recording Requested By:

Name SB Grant + EB Franklin LLC

Address Suite 202 #437, 29030 SW Town Center

Loop East
City/State/Zip Wilsonville OR 97070

EUREKA COUNTY, NEVADA
H.N. REBALEATI, RECORDER
FILE NO. FEES 44⁰⁰

204498

Grant Deed
(Title of Document)

COPY

This page added to provide additional information required by NRS 111.312 Sections 1-2. (Additional recording fees applies)

RESIGNATION OF TRUSTEE AND APPOINTMENT OF SUCCESSOR TRUSTEE

I, GEORGE K. SALTMARSH, the sole trustee to the GEORGE K. SALTMARSH REVOCABLE TRUST created by instrument dated January 7, 2002, and amended on May 14, 2004, hereby resign as trustee to said trust and request that the nominated successor trustee, EVELYN OGLE, assume the position and duties as sole trustee immediately.

This resignation shall take effect immediately.

Dated: July 6, 2005

George K. Saltmarsh
GEORGE K. SALTMARSH

I, EVELYN OGLE, accept the trust and hereby assume the duties and responsibilities of sole trustee to the above-mentioned trust.

Dated: July 6, 2005

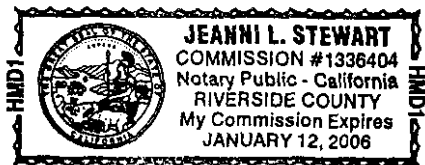
Evelyn P. Ogle
EVELYN OGLE

ACKNOWLEDGMENT

State of California))
) ss.
County of Riverside)

On July 6, 2005, before me, JEANNI L. STEWART, personally appeared, GEORGE K. SALTMARSH and EVELYN OGLE, personally known to me (or proved to me on the basis of satisfactory evidence) to be the persons whose names are subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacities, and that by their signatures on the instrument the persons, or the entity upon behalf of which the persons acted, executed the instrument. WITNESS my hand and official seal.

Jeanni L. Stewart
NOTARY PUBLIC



The undersigned hereby affirms that there is no Social Security number contained in this document.

THIS DOCUMENT PREPARED BY:
AND WHEN RECORDED MAIL
THIS DEED AND MAIL TAX
STATEMENTS TO:

S B Grant & E B Franklin LLC
Suite 202#431
29030 SW Town Center Loop East
Wilsonville, OR 97070-5499

Above this line reserved for Official Use Only

Assessor's Parcel No. = 002-042-06

GRANT DEED

DOCUMENTARY TRANSFER TAX \$ 15.60

- Computed on full value of property conveyed, or
 Computed on full value less liens and encumbrances remaining at time of sale.



KNOW ALL MEN BY THESE PRESENTS THAT:

FOR VALUABLE CONSIDERATION OF TEN DOLLARS (\$10.00), and other good and valuable consideration, cash in hand paid, the receipt and sufficiency of which is hereby acknowledged, Evelyn Ogle, Trustee of the George K. Saltmarsh Revocable Trust created by instrument dated January 7, 2002, hereinafter referred to as "Grantor", do hereby grant, bargain, sell, and convey unto S B Grant & E B Franklin LLC, a Limited Liability Company organized under the laws of the state of Oregon, hereinafter "Grantee", the following lands and property, together with all improvements located thereon, lying in the County of Eureka, State of Nevada, to-wit:

SEE DESCRIPTION ATTACHED "EXHIBIT A"

LESS AND EXCEPT all oil, gas and minerals, on and under the above described property owned by Grantor, if any, which are reserved by Grantor.

SUBJECT to all easements, rights-of-way, protective covenants and mineral reservations of record, if any.

TO HAVE AND TO HOLD TOGETHER with all tenements, hereditaments, and appurtenances, including easements and water rights, if any, thereto belonging or appertaining, and any reversions, remainders, rents, issues or profits thereof.

GRANTORS do for Grantor and Grantor's heirs, personal representatives, executors and assigns forever hereby covenant with GRANTEE that Grantor is lawfully seized in fee simple of said premises; that premises are free from all encumbrances, unless otherwise

noted above; that Grantor has a good right to sell and convey the same as aforesaid; and to forever warrant and defend the title to the said lands against all claims whatever.

WITNESS Grantor(s) hand(s) this the 22 day of March, 2006.

Evelyn Ogle TTEE
Grantor
Evelyn Ogle, Trustee

STATE OF California
COUNTY OF Riverside

This instrument was acknowledged before me on _____
(date) by Evelyn Ogle, Trustee of the George K. Saltmarsh Revocable Trust created by
instrument dated January 7, 2002

Notary Public

Printed Name: _____

(Seal)

My Commission Expires: _____

GRANTOR'S NAME, ADDRESS:

Evelyn Ogle
10690 Deerfield Dr.
Cherry Valley, CA 92223

GRANTEE'S NAME, ADDRESS:

S B Grant & E B Franklin LLC
Suite 202#431
29030 Town Center Loop East
Wilsonville, OR 97070-5499

RETURN RECORDED DEED AND SEND TAX STATEMENTS TO GRANTEE

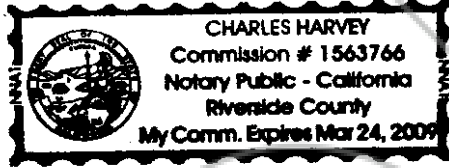
CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California }
County of Riverside } ss.

On March 22, 06 before me, Charles HARVEY, Notary Public
Date Name and Title of Officer (e.g., "Jane Doe, Notary Public")
personally appeared Evelyn Ogle
Name(s) of Signer(s)

personally known to me
 proved to me on the basis of satisfactory evidence

to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.

[Signature]
Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Grant Deed

Document Date: 3/22/06 Number of Pages: 3

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer

Signer's Name: Evelyn Ogle

- Individual
- Corporate Officer — Title(s): _____
- Partner — Limited General
- Attorney-in-Fact
- Trustee
- Guardian or Conservator
- Other: _____

Signer Is Representing: _____

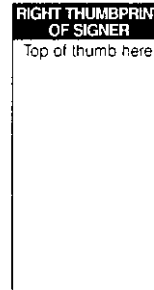
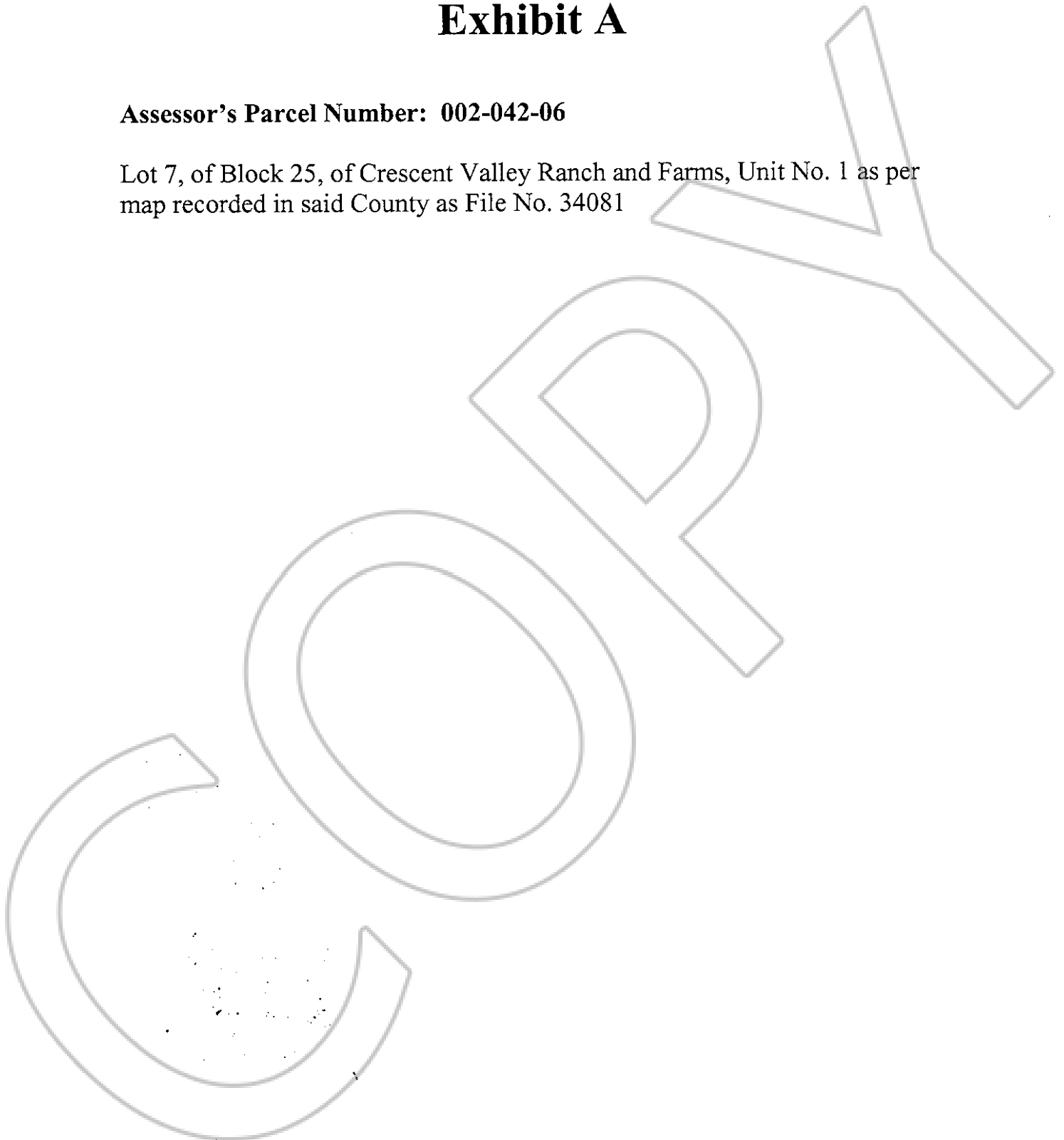


Exhibit A

Assessor's Parcel Number: 002-042-06

Lot 7, of Block 25, of Crescent Valley Ranch and Farms, Unit No. 1 as per map recorded in said County as File No. 34081



204498

BOOK 435 PAGE 058

STATE OF NEVADA DECLARATION OF VALUE

FOR RECORDERS OPTIONAL USE ONLY

Document/Instrument#: 204498
 Book: 435 Page: 53-58
 Date of Recording: 4-17-06
 Notes: _____

1. Assessor Parcel Number (s)

- a) 002-042-06
- b) _____
- c) _____
- d) _____

2. Type of Property:

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

3. Total Value/Sales Price of Property:

\$ 3,977.00
 Deed in Lieu of Foreclosure Only (value of property) \$ _____
 Transfer Tax Value: \$ 3,977.00
 Real Property Transfer Tax Due: \$ 15.60

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: agent for buyer
 Signature: _____ Capacity: _____

SELLER (GRANTOR) INFORMATION

(REQUIRED)

Print Name: Evelyn Ogle
 Address: 10690 Deerfield Dr.
 City: Cherry Valley
 State: CA Zip: 92223

BUYER (GRANTEE) INFORMATION

(REQUIRED)

Print Name: SB Grant + EB Franklin LLC
 Address: Suite 202 # 431, 29030 SW Town Center Loop East
 City: Wilsonville
 State: OR Zip: 97070

COMPANY/PERSON REQUESTING RECORDING

(REQUIRED IF NOT THE SELLER OR BUYER)

Print Name: SB Grant + EB Franklin LLC Escrow # _____
 Address: Suite 202 # 431, 29030 SW Town Center Loop East
 City: Wilsonville State: OR Zip: 97070