

When Recorded Mail To:

AZ Land Research, LLC  
10000 N. 31<sup>ST</sup> Avenue, Suite C302  
Phoenix, AZ 85051

Assessor's Parcel Nos.: 003-014-01  
File #000427-NV006-06

BOOK 440 PAGE 247-248  
OFFICIAL RECORDS  
RECORDED AT THE REQUEST OF  
*Orbit Investments*  
2006 AUG 15 PM 2:48

EUREKA COUNTY, NEVADA  
M.H. REBALEATI, RECORDER  
FILE NO. 205717  
FEES 15.00

THIS SPACE FOR RECORDER'S USE ONLY

## QUITCLAIM DEED

For the consideration of Ten and 00/100 Dollars, and other good and valuable consideration, receipt of which is hereby acknowledged, I or we,

**SYBIL ANN LYNCH**, a married woman

the Grantor (s) do hereby remise, release and forever quitclaim to

**ERNEST CARLYLE LYNCH, III**, a married man, as his sole and separate property,

the Grantee (s)

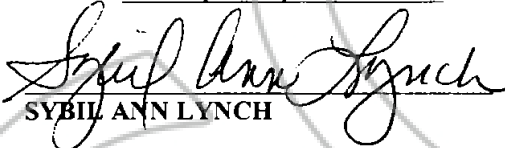
the following described real property situated in the County of Eureka, State of Nevada:

SEE EXHIBIT "A" HERETO AND MADE A PART HEREOF

SUBJECT TO: Current taxes, assessments, reservations in patents and all easements, rights of way, encumbrances, liens, covenants, conditions, and restrictions as may appear of record.

And the Grantor (s) do (es) warrant the title against all persons whomsoever, subject to the matters above set forth.

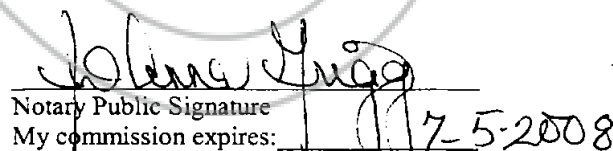
DATED: 6/30/06

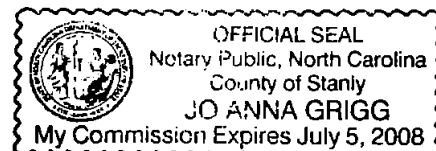
  
**SYBIL ANN LYNCH**

STATE OF NC COUNTY OF Stanly

On 30 before me June 2006, notary public, personally appeared SYBIL ANN LYNCH personally known to me (or 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.

  
Notary Public Signature  
My commission expires: 7-5-2008



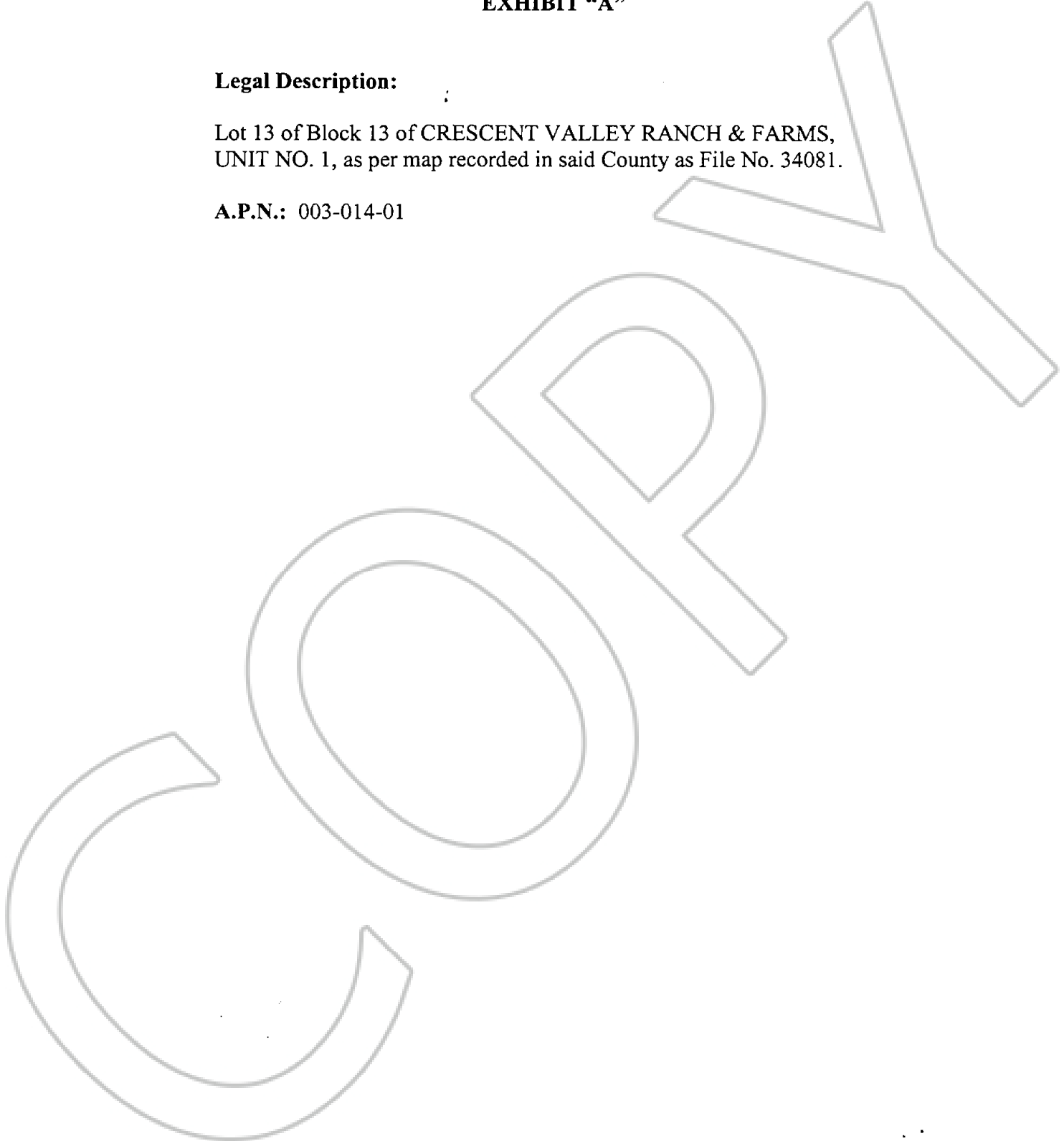
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**EXHIBIT "A"**

**Legal Description:**

Lot 13 of Block 13 of CRESCENT VALLEY RANCH & FARMS,  
UNIT NO. 1, as per map recorded in said County as File No. 34081.

**A.P.N.:** 003-014-01



**205717**

**BOOK 440 PAGE 248**

STATE OF NEVADA  
DECLARATION OF VALUE

1. Assessors Parcel Number(s)

a) 003-014-01  
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 \_\_\_\_\_

**FOR RECORDERS OPTIONAL USE ONLY**

DOCUMENT/INSTRUMENT #: 205717  
BOOK 440 PAGE 247-248  
DATE OF RECORDING: 8-15-06  
NOTES: \_\_\_\_\_

3. Total Value/Sales Price of Property: \$ \_\_\_\_\_

Deed in Lieu of Foreclosure Only (value of property) ( \_\_\_\_\_

Transfer Tax Value: \$ \_\_\_\_\_

Real Property Transfer Tax Due: \$ \_\_\_\_\_

4. If Exemption Claimed:

a. Transfer Tax Exemption per NRS 375.090, Section # 5  
b. Explain Reason for Exemption: Spouse to Spouse

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 parties agree that 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 B. J. J. D.B.

Capacity Buyer

Signature \_\_\_\_\_

Capacity Seller

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

Print Name: Ernest C. Lynch

Address: 424 Kimmswick Rd

City: Charlotte

State: NC Zip: 28214

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

Print Name: QBBT INVESTMENTS, LLC

Address: 10000 N. 31st Ave.

City: SUITE C-302

State: PHOENIX, AZ 85051 Zip: \_\_\_\_\_

**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/MICROFILMED)