

DOC # 0225148

11/12/2013

01:05 PM

Official Record

Recording requested By
SMILE4U INC

Eureka County - NV

Mike Rebaleati - Recorder

Fee: \$15.00

Page 1 of 2

RPTT: \$9.75

Recorded By: LLH

Book- 557 Page- 0195



0225148

After recording please return to:

Kirk T. Smith

200 E Maxwell, Apt 10

Lexington, KY 40508

APN: 005-690-04

Mail Tax Statements to Above

SPECIAL WARRANTY Deed

For and in consideration paid, the undersigned, **Smile4u Inc., a Washington Corporation**, hereinafter referred to as Grantor, hereby conveys all rights and title in the following described real estate to **Kirk T. Smith, a single person**, hereinafter referred to as Grantee, legally described as:

LEGAL DESCRIPTION: T30N R50E Sec 5 NW4NE4NE4

Situate in the County of **Eureka** in the state of **Nevada**

The Grantor will defend the right 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, easements, or encumbrances. The Grantor makes no representation about the suitability of the real estate for a 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 to 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 considered 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 20th day of September, 2013.

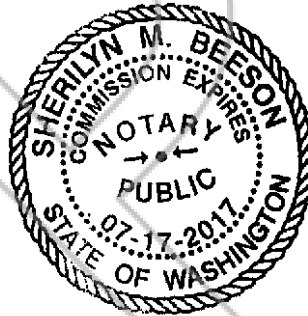
Mark Abbott

Acknowledgment - Corporation

State of Washington
County of Whatcom

The foregoing instrument was acknowledged before me this 20th day of September,
2013 by Mark Abbott, President of Smile4u Inc., a Washington corporation on behalf of the
said corporation.

My Commission Expires: 7/17/17 [Signature] Notary Public



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STATE OF NEVADA
DECLARATION OF VALUE FORM

DOC # DV-225148

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1. Assessor Parcel Number(s)

a) 005-690-04
b) _____
c) _____
d) _____

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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
Other _____

Page 1 of 1 Fee: \$15.00
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Notes: _____

3. Total Value/Sales Price of Property

\$ 2,500.00

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

Transfer Tax Value:

\$ 2,500.00

Real Property Transfer Tax Due

\$ 9.75

4. If Exemption Claimed:

a. Transfer Tax Exemption per 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 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 Mark Realeati

Capacity Seller

Signature Mark Realeati

Capacity Buyer

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Smile4u Inc
Address: PO Box 888
City: Lynden
State: WA Zip: 98264

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Kirk T Smith
Address: 200 E Maxwell, APT 10
City: Lexington
State: KY Zip: 40508

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

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

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED