

Assessor's Parcel Number:
007-330-36

Prepared By:
Cheri Sestanovich
HC 62 Box 62640
Eureka, Nevada 89316

After Recording Return To:
Sestanovich Hay & Cattle LLC
HC 62 Box 62640
Eureka, Nevada 89316

DOC # 0231015
03/24/2016 04:11 PM
Official Record
Recording requested By
CHERI SESTANOVICH
Eureka County - NV
Sara Simmons - Recorder
Fee: \$15.00 Page 1 of 3
RPTT: Recorded By: LH
Book- 589 Page- 0238



SPACE ABOVE THIS LINE FOR RECORDER'S USE

QUITCLAIM DEED

On March 24, 2016 THE GRANTOR(S),

- Cheri Sestanovich and Jerry Sestanovich, a married couple

for and in consideration of: One Dollar (\$1.00) and/or other good and valuable consideration conveys, releases and quitclaims to the GRANTEE(S):

- Sestanovich Hay & Cattle LLC, Cheri Sestanovich, owner and member of LLC residing at HC 62 Box 62640, Eureka, Eureka County, Nevada 89316 the following described real estate, situated in an unincorporated area in the County of Eureka, State of Nevada:

Legal Description: application #86030 *regarding permit # 70073*

State of Nevada, Division of Water Resources

Grantor does hereby convey, release and quitclaim all of the Grantor's rights, title, and interest in and to the above described property and premises to the Grantee(s), and to the Grantee(s) heirs and assigns forever, so that neither Grantor(s) nor Grantor's heirs, legal representatives or assigns shall have, claim or demand any right or title to the property, premises, or appurtenances, or any part thereof.

Mail Tax Statements To:
Cheri Sestanovich
HC 62 Box 62640
Eureka, Nevada 89316

[SIGNATURE PAGE FOLLOWS]

COPY



0231015

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Grantor Signatures:

DATED: 3-24-16

Cheri Sestanovich

Cheri Sestanovich
HC 62 Box 62640
Eureka, Nevada
89316

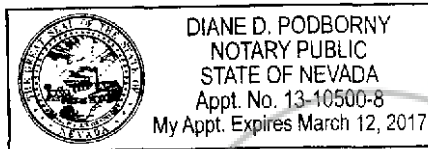
DATED: 3-24-16

Jerry Sestanovich

Jerry Sestanovich
HC 62 Box 62640
Eureka, Nevada
89316

STATE OF NEVADA, COUNTY OF EUREKA, ss:

This instrument was acknowledged before me on this 24th day of March, 2016
by Cheri Sestanovich and Jerry Sestanovich.



Diane Podborny
Notary Public

Deputy Clerk
Title (and Rank)

My commission expires March 12, 2017

STATE OF NEVADA
DECLARATION OF VALUE FORM

DOC # DV-231015

03/24/2016 04:11 PM

Official Record

1. Assessor Parcel Number(s)

- a) 007-330-36
- b) _____
- c) _____
- d) _____

Recording requested By
CHERI SESTANOVICH

Eureka County - NV
Sara Simmons - Recorder

Page 1 of 1 Fee: \$16.00
Recorded By: LH RPTT.
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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 Water rights

Date of Recording: _____
Notes: _____

3. Total Value/Sales Price of Property

\$ 10,000
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 #9
- b. Explain Reason for Exemption: change name from self to business

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 Cheri Sestanovich Capacity owner-member LLC.

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION
(REQUIRED)

Print Name: Cheri Sestanovich
Address: HC 62 Box 62640
City: Eureka.
State: NV Zip: 89316

BUYER (GRANTEE) INFORMATION
(REQUIRED)

Print Name: Sestanovich Hay e' Caffle LLC.
Address: HC 62 Box 62640
City: Eureka
State: NV Zip: 89316

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

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