

EUREKA COUNTY, NV **2021-247485**
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RELAND PROPERTIES LLC
LISA HOEHNE, CLERK RECORDER

Affidavit of Survivorship

State of ~~Nevada~~ *Florida*

County of ~~Eureka~~ *Lee*

I, Susan R. Galatz (f.n.a. Susan R. Sweet), residing at 6810 Staley Farms Rd, Fort Myers, Florida 33905-6926, being of legal age, depose and say that:

1. On August, 28, 1997, by Joint Tenancy Deed recorded in Book 312, Page 314, of the EUREKA County records as document number 168446 ('the Deed') [and thereafter by Corrective Joint Tenancy Deed recorded in Book 315, Page 310, of the EUREKA County records as document number 168866 ('the Deed')], the Affiant and James J. Sweet become owners of the following legally described property:

Lot 4, Block 15, CRESCENT VALLEY RANCH AND FARMS, UNIT NO.3
SUBDIVISION, according to the official map thereof filed in the office of the County Recorder of Eureka County, 11/05/59, File 34551.

2. Affiant and James J. Sweet own the property in joint tenancy with right of survivorship.

3. On August 05, 1998, James J. Sweet, died, thereby terminating James J. Sweet interest in the above-described real property. A certified copy of the death certificate of James J. Sweet is attached hereto as Exhibit A.

Grantor Signatures:

DATED: 11/21/21

Grantor Signature:

Susan R Galatz (Sweet)

Susan R. Galatz, F.W.A. Susan R. Sweet
6810 Staley Farms R
Fort Meyers, FL 33905-6926

STATE OF Fla., COUNTY OF LEE

On this 12th day of November, 2021, before me,
Susan Roberto G. Diaz personally appeared, known to me (or satisfactorily proven)
to be the persons whose names are subscribed to the within instrument and acknowledged that
they executed the same as for the purposes therein contained. F.P. DRIVE WORK

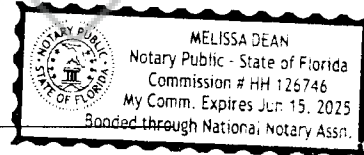
In witness whereof I hereunto set my hand and
official seal.

Melissa M Dean

Notary Public
Signature of person taking
acknowledgment

MELISSA DEAN

My commission expires _____



CERTIFICATION OF VITAL RECORD

STATE OF ARIZONA

STATE OF ARIZONA DEPARTMENT OF HEALTH SERVICES: OFFICE OF VITAL RECORDS CERTIFICATE OF DEATH

Form containing personal information: NAME OF DECEASED (JAMES I. SWEET), DATE OF DEATH (AUGUST 5, 1998), PLACE OF DEATH (PIMA COUNTY, TUCSON), USUAL RESIDENCE (ARIZONA, PIMA COUNTY, TUCSON), FATHER'S NAME (DANIEL SWEET), MOTHER'S MAIDEN NAME (EVELYN DEVANEY), and cause of death (Respiratory Failure, Renal Failure).

CERTIFIED COPY OF VITAL RECORDS

STATE OF ARIZONA COUNTY OF PIMA

DATE ISSUED August 25, 1998

This is a true and exact reproduction of the document officially registered and to be placed on file in the VITAL RECORDS SECTION, DEPARTMENT OF HEALTH SERVICES, PHOENIX, ARIZONA. Issued under the authority of A.R.S. 36-341, and by direction of

DENNIS W. DOUGLAS County Registrar Pima County Health Department

653307

This copy not valid unless prepared by engraved border displaying county seal in color and impressed with raised seal of issuing agency.

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE