APN: 001-065-11 RETURN RECORDED DEED TO: Joel W. Locke, ESQ. ALLISON MacKENZIE, LTD. P.O. Box 646 Carson City, NV 89702

MAIL TAX STATEMENTS TO: Eureka Salvage, LLC Jacob W. Brown, Managing Member 2040 Eastlake Blvd. Washoe Valley, NV 89704

The person executing this document hereby affirm that this document submitted for recording does not contain the social security number of any person or persons pursuant to NRS 239B.030.

EUREKA COUNTY, NV LAND-QTD Rec:\$37.00 Total:\$37.00 JOEL W LOCKE ESQ

2024-252219 06/07/2024 02:35 PM Pgs=6



QUITCLAIM DEED

For valuable consideration in the amount of Ten and No/100 Dollars (\$10.00), receipt of which is hereby acknowledged, JACOB W. BROWN, Personal Representative of the Estate of JOHN WAYNE BROWN, who took title as JOHN W. BROWN, a single man, does hereby release, remise, and forever quitclaim all the interest to EUREKA SALVAGE, LLC, a Nevada Limited Liability Company, in and to that certain real property situated in Eureka County, State of Nevada, more particularly described as follows:

100 N. Main St. known as the Alpine Lodge, Block 37, Lots 1, 2, 3, 4, and 5.

APN: 001-065-11

(This legal description was previously recorded in the Official Records of Eureka County, State of Nevada, on August 29, 2022, as Document No. 2022-248672).

TOGETHER WITH all and singular the tenements, hereditaments, and appurtenances thereunto belonging or in anywise appertaining, and the reversion and reversions, remainder or remainders, rents, issues, and profits thereof.

TO HAVE AND TO HOLD all and singular the premises, together with the appurtenances, unto the said grantee and to its successors and assigns forever.

IN WITNESS WHEREOF, the Grantors have executed this Quitclaim Deed.

Dated this 23 day of	APRIL	2024.
		MA
		JACOB W. BROWN, Personal
		& épresentative
STATE OF NEVADA)	
	: ss.	
CARSON CITY)	
	,	
On app	ul 23	, 2024, personally appeared before me, a notar Representative of the Estate of JOHN WAYNE BROWN
public, JACOB W. BROW	N. Personal	Representative of the Estate of IOHN WAYNE BROWN
Personal Representative r	ersonally kr	nown (or proved) to me to be the person whose name i
subscribed to the forces	na Ouitalain	m Dood redes selected to the to be the person whose name i
	ng Quitciam	m Deed, who acknowledged to me that he executed the
foregoing document	A STATE OF THE PERSON NAMED IN COLUMN NAMED IN	

SONJA FISCHER
NOTARY PUBLIC
STATE OF NEVADA
APPT. No. 04-89854-12
MY APPT. EXPIRES MARCH 14, 2028

NOTARY PUBLIC

4864-0743-8520, v. 1

State of Nevada Declaration of Value

1. Assessor Parcel Number(s): a) 001-065-11 b)	
2. Type of Property:a) □Vacant Landb) ■Single Family F	FOR RECORDER'S OPTIONAL USE ONLY Document/Instrument #:
c) ☐ Condo/Townhouse d) ☐ 2-4 Plex	Book: Page:
e) Apartment Bldg. f) Comm'l/Ind'l	Date of Recording:
g) □ Agricultural h) □ Mobile Home i) □ Other	Notes:
3. Total Value/Sales Price of Property:	S
Deed in Lieu of Foreclosure Only (value of	f property) \$
Transfer Tax Value:	S
Real Property Transfer Tax Due:	\$0
4. <u>If Exemption Claimed</u> :	
a. Transfer Tax Exemption, per NRb. Explain Reason for Exemption:	
5. Partial Interest: Percentage being transfe	erred: 100%
The undersigned declares and acknowledges, under that the information provided is correct to the be documentation if called upon to substantiate the infolial claimed exemption, or other determination of additi interest at 1% per month.	r penalty of perjury, pursuant to NRS 375.060 and NRS 375.110, pest of their information and belief, and can be supported by cormation provided herein. Furthermore, the disallowance of any ional tax due, may result in a penalty of 10% of the tax due plus
Pursuant to NRS 375.030, the Buyer and Seller sha	ll be jointly and severally liable for any additional amount owed.
Signature Hannel Thornes	Capacity Agent
Signature Hannel Rhods	Capacity Agent
SELLER (GRANTOR) INFORMATION REQUIRED	BUYER (GRANTEE) INFORMATION REQUIRED
Print Name: <u>Jacob W. Brown</u>	Print Name: Jacob W. Brown, Manager of Eureka Salvage, LLC
Address: 2040 Eastlake Blvd	Address: 2040 Eastlake Blvd
City: <u>Washoe Valley</u>	City: <u>Washoe Valley</u>
State: <u>NV</u> Zip: <u>89704</u>	State: <u>NV</u> Zip: <u>89704</u>
COMPANY/PERSON REQUESTING RECORI	OING (REQUIRED IF NOT THE SELLER OR BUYER)
Print Name: Allison MacKenzie, Ltd.	Escrow #
Address: 402 North Division Street, P.O. Box 646	
City: Carson City	StateNVZip89702



FRANCISCO V. AGUILAR Secretary of State 401 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708 Annual or Amended List and State Business License Application

Website: www.nvsos.gov www.nvsilverflume.gov

List of Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers: EUREKA SALVAGE, LLC NAME OF ENTITY Entity or Nevada Business Identification Number (NVID) TYPE OR PRINT ONLY - USE DARK INK ONLY - DO NOT HIGHLIGHT IMPORTANT: Read instructions before completing and returning this form. Please indicate the entity type (check only one): Corporation Filed in the Office of Business Number	
NAME OF ENTITY TYPE OR PRINT ONLY - USE DARK INK ONLY - DO NOT HIGHLIGHT IMPORTANT: Read instructions before completing and returning this form. Please indicate the entity type (check only one):	
NAME OF ENTITY TYPE OR PRINT ONLY - USE DARK INK ONLY - DO NOT HIGHLIGHT IMPORTANT: Read instructions before completing and returning this form. Please indicate the entity type (check only one):	411.41.10.10.10.10.10.10.10.10.10.10.10.10.10
TYPE OR PRINT ONLY - USE DARK INK ONLY - DO NOT HIGHLIGHT IMPORTANT: Read instructions before completing and returning this form. Please indicate the entity type (check only one):	
Please indicate the entity type (check only one):)
This corporation is publicly traded, the Central Index Key number is: This corporation is publicly traded, the Central Index Key number is: This corporation is publicly traded, the Central Index Key number is: Filing Number 20244082190 Filed On 05/24/2024 21:44:03 PM Number of Pages Limited Partnership Limited-Liability Partnership Limited-Liability Limited Partnership Business Trust	
Corporation Sole Additional Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers, may be listed on a supplemental partners.	age
CHECK ONLY IF APPLICABLE Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. 001 - Governmental Entity 006 - NRS 680B.020 Insurance Co, provide license or certificate of authority number For nonprofit entities formed under NRS chapter 80: entities without 501(c) nonprofit designation are required to maintain a state business license	
the fee is \$200.00. Those claiming an exemption under 501(c) designation must indicate by checking box below. Pursuant to NRS Chapter 76, this entity is a 501(c) nonprofit entity and is exempt from the business license fee. Exemption Code 002	Э,
For nonprofit entities formed under NRS Chapter 81: entities which are Unit-owners' association or Religious, Charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C \$ 501(c) are excluded from the requirement to obtain a state business license. Please indicate below if this entity falls under one of these categories by marking the appropriate box. If the entity does not fall under either of these categories please submit \$200.00 for the state business license. Unit-owners' Association Religious, charitable, fraternal or other organization that qualifies as a tax-exempt organization pursuant to 26 U.S.C. \$501(c)	ŧ.
For nonprofit entities formed under NRS Chapter 82 and 80:Charitable Solicitation Information - check applicable box Does the Organization intend to solicit charitable or tax deductible contributions? No - no additional form is required Yes - the "Charitable Solicitation Registration Statement" is required. The Organization claims exemption pursuant to NRS 82A 210 - the "Exemption From Charitable Solicitation Registration Statement" is required **Failure to include the required statement form will result in rejection of the filing and could result in late fees.**	



FRANCISCO V. AGUILAR Secretary of State 401 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708

Website: www.nvsos.gov www.nvsilverflume.gov

Annual or Amended List and State Business License Application - Continued

Officers, Managers, Members, General Partners, Managing Partners, Trustees or Subscribers:

CORPORATION, INDICATE THE Managing Member:	
Jacob W Brown	USA
Name	Country
2040 Eastlake Blvd	Washoe Valley NV 89704
Address	City State Zip/Postal Code

None of the officers and directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Jacob W Brown	Managing Member	05/24/2024
Signature of Officer, Manager, Managing Me	ember, Title	Date
General Partner, Managing Partner, Trustee		
Subscriber, Member, Owner of Business,		
Partner or Authorized Signer FORM WILL BE RETUR	RNED IF	
LINGICNED		

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

EUREKA SALVAGE, LLC

Nevada Business Identification # NV20131358811 Expiration Date: 06/30/2025

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which, by law, cannot be waived.



Certificate Number: B202405244677045

You may verify this certificate

online at https://www.nvsilverflume.gov/home

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 05/24/2024.

FVAquelan

FRANCISCO V. AGUILAR Secretary of State