

APN#: 005-050-03
Escrow No. 24-213850

**MAIL TAX STATEMENT TO AND
WHEN RECORDED RETURN TO:**

Thomas Schram
5255 E Winnemucca Blvd
Winnemucca, NV 89445

EUREKA COUNTY, NV
RPTT:\$31.20 Rec:\$37.00
\$68.20 Pgs=4
WFG NEVADA - RW
KATHERINE J. BOWLING, CLERK RECORDER

2025-254818
06/26/2025 01:32 PM

GRANT, BARGAIN, SALE DEED

R.P.T.T. \$31.20

THIS INDENTURE WITNESSETH: That

Premium Land Company LLC, a California Limited Liability Company,

for a valuable consideration, the receipt of which is hereby acknowledged, does hereby Grant, Bargain, Sell and Convey to

Thomas Schram, an unmarried man,

all that real property situated in the County of Eureka, State of Nevada, bounded and described as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF

- SUBJECT TO:
1. Taxes for the fiscal year 2024-2025.
 2. Rights of way, reservations restrictions, easements and conditions of record.

Together with all and singular the tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining.

WITNESS my hand this 24th day of June, 2025.

Premium Land Company LLC, a California Limited Liability Company

By: [Signature]
Nicholas Flageollet, Sole Member

STATE OF NEVADA
COUNTY OF _____

This Instrument was acknowledged before me this 24th day of June, 2025 by Nicholas Flageollet, as Sole Member, of Premium Land Company LLC, a California Limited Liability Company.

Notary Public for Nevada
My Commission Expires: _____

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Marin

On June 24, 2025 before me, Michael Judson, Notary Public
(Here insert name and title of the officer)

personally appeared Nicholas Flageollet

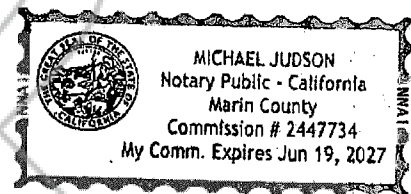
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.


Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

DESCRIPTION OF THE ATTACHED DOCUMENT

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)
☐ Corporate Officer

(Title)

- ☐ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they- is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

EXHIBIT "A"
LEGAL DESCRIPTION

TOWNSHIP 31 NORTH, RANGE 48 EAST, M.D.B. & M.
SECTION 29: NE 1/4 SE 1/4 NE 1/4

APN: 005-050-03



**STATE OF NEVADA
DECLARATION OF VALUE**

1. Assessors Parcel Number(s)

a) 005-050-03

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

☐ Other _____

**FOR RECORDER'S OPTIONAL USE
ONLY**

Book: _____ Page: _____

Date of Recording: _____

Notes: _____

3. Total Value/Sales Price of Property:

\$7,997.00

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

Transfer Tax Value: _____

\$7,997.00

Real Property Transfer Tax Due: _____

\$31.20

4. If Exemption Claimed:

a. Transfer Tax Exemption per NRS 375.090, Section # _____

b. Explain Reason for Exemption: _____

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 _____

Capacity Grantor

Signature _____

Capacity Grantee

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

Print Name: Premium Land Company LLC, a
California Limited Liability Company

Address: 2021 Fillmore St. #1390

City: San Francisco

State: CA

Zip: 94115

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

Print Name: Thomas Schram

Name: _____

Address: 5255 E Winnemucca Blvd

City: Winnemucca

State: NV

Zip: 89445

COMPANY/PERSON REQUESTING RECORDING required if not the seller or buyer

Print Name: WFG National Title Insurance Company

Escrow #: 24-213850

Address: 905 Railroad Street Suite 204

City: Elko

State: NV

Zip: 89801

AS A PUBLIC RECORD THIS FORM MAY BE RECORDED/MICROFILMED