

Official Record

Recording requested By
LIONEL SAWYER & COLLINS

Lincoln County - NV

Leslie Boucher - Recorder

Fee: \$18.00

Page 1 of 5

RPTT:

Recorded By: DP

Book- 243 Page- 0247



0132317

APN: 011-200-27

RECORDING REQUEST BY:

LIONEL SAWYER & COLLINS
Bank of America Plaza 1700
300 South Fourth Street
Las Vegas, NV 89101

WHEN RECORDED MAIL TO:

Lela F. Christian, Trustee
Christian Family Trust
1007 Santa Ynez Ave.
Henderson, NV 89105

SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USE

AFFIDAVIT AND CERTIFICATE OF SUCCESSOR TRUSTEE

The undersigned hereby affirms that there is a Social Security Number contained in this document as required by Law.

By: _____

John E. Dawson, Esq.



APN: 011-200-27

Recorded at the request of and
When Recorded Return to:
LIONEL SAWYER & COLLINS
ATTN: JOHN E. DAWSON, ESQ.
300 South Fourth Street, Suite 1700
Las Vegas, Nevada 89101

Mail tax statements to:
Lela F. Christian, Trustee
Christian Family Trust
1007 Santa Ynez Ave.
Henderson, NV 89105

AFFIDAVIT AND CERTIFICATE OF SUCCESSOR TRUSTEE

STATE OF NEVADA)
)
COUNTY OF CLARK)

Lela F. Christian, being first duly sworn, deposes and says:

1. The Christian Family Trust (the "Trust") was originally created on June 15, 1992 wherein Russell E. Christian and Lela F. Christian were named as Co-Trustees of the Trust.

2. Russell E. Christian died on March 28, 2008. A certified copy of his Death Certificate is attached hereto as **Exhibit A** and by this reference incorporated herein.

3. Lela F. Christian is named to serve as the Successor Trustee of the Trust and hereby files this Affidavit and Certificate.

4. The Trust holds real property situated in the County of Lincoln, State of Nevada, and more particularly described as follows:

A five (5) acre parcel of land in the Northwest Quarter (NW1/4) of Section 32, Township 6 South, Range 61 East, MDBYM, in Pahrangat Valley, Lincoln County, Nevada, described as:



0132317

Book: 243
Page: 250

07/21/2008
Page 4 of 5

COPY

Exhibit A



0132317

Book 243 Page 251

07/21/2008 Page 5 of 5

STATE OF NEVADA - DEPARTMENT OF HUMAN RESOURCES DIVISION OF HEALTH - VITAL STATISTICS

CERTIFICATE OF DEATH

2008005180

STATE FILE NUMBER

TYPE OR PRINT IN PERMANENT BLACK INK

DECEDENT

IF DEATH OCCURRED IN INSTITUTION SEE HANDBOOK REGARDING COMPLETION OF RESIDENCE ITEMS

PARENTS

DISPOSITION

TRADE CALL

CERTIFIER

REGISTRAR

CAUSE OF DEATH

CONDITIONS IF ANY WHICH GAVE RISE TO IMMEDIATE CAUSE -> STATING THE UNDERLYING CAUSE LAST

Main form containing fields for deceased name, date of death, county, city, hospital, race, age, birth date, occupation, residence, parents, informant, burial, funeral director, certifier, registrar, and cause of death.

STATE REGISTRAR

"CERTIFIED TO BE A TRUE AND CORRECT COPY OF THE DOCUMENT ON FILE WITH THE REGISTRAR OF VITAL STATISTICS"

STATE OF NEVADA. This copy was issued by the Southern Nevada Health District from State certified documents as authorized by the State Board of Health pursuant to NRS 440.175.

NOT VALID WITHOUT THE RAISED SEAL OF THE SOUTHERN NEVADA HEALTH DISTRICT

Lawrence K. Sands, D.O., M.P.H. Registrar of Vital Statistics

Date Issued: APR 07 2008