



0148647

Recording Requested by
The Law Offices of Rozsa Gyene

AND WHEN RECORDED PLEASE MAIL TO:
MARLYN F. COX
320 SOUTH ARDMORE AVENUE, #311
LOS ANGELES, CA 90020

SPACE ABOVE THIS LINE FOR RECORDER'S USE

APN Number: 001-260-11 and 001-260-12 Escrow No.

TRUST TRANSFER DEED

(Grant Deed (Excluded from Reappraisal Under Proposition 13, i.e., Calif. Const. Art 13A Section t, et seq:))

DOCUMENTARY TRANSFER TAX IS: \$ 0

The undersigned Grantor(s) declare(s) under penalty of perjury that the foregoing is true and correct: **THERE IS NO CONSIDERATION FOR THIS TRANSFER.**

This is a Trust Transfer under section 62 of the Revenue and Taxation Code and Grantor(s) has/have checked the applicable exclusions:

This conveyance transfers the Grantor's interest into his or her revocable trust, R&T 11930.

Grantor(s) **MARLYN COX, A MARRIED WOMAN AS HER SOLE AND SEPARATE PROPERTY** hereby GRANT(s) to **THE MARLYN FORTICH COX LIVING TRUST, DATED NOVEMBER 6, 2015 AND ANY AMENDMENTS THERETO**
the real property in the PIOCHE County of LINCOLN, State of NEVADA, described as:

PARCEL NO. 1

PERCEL 3 AS SHOWN ON PARCEL MAP FOR J. AND S. PROPERTIES, L.L.C. RECORDED MAY 24, 2006 IN PLAT BOOK C, PAGE 213 AS FILE NO 126570 IN THE OFFICE OF THE COUNTY RECORDER OF LINCOLN COUNTY, NEVADA, LOCATED IN A PORTION OF THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 11, TOWNSHIP 1 NORTH, RANGE 67 EAST, M.D.B.&M.

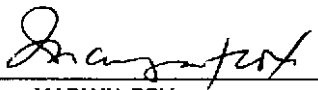
PARCEL NO. 2

PARCEL 4 AS SHOWN ON PARCEL MAP FOR J AND S. PROPERTIES, L.L.C. RECORDED MAY 24, 2006 IN PLAT BOOK C, PAGE 213 AS FILE NO. 126570 IN THE OFFICE OF THE COUNTY RECORDER OF LINCOLN COUNTY, NEVADA, LOCATED IN A PORTION OF THE SOUTHWEST QUARTER OF THE SOUTHWEST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 11, TOWNSHIP 1 NORTH, RANGE 67 EAST, M.D.B. & M.

SUBJECT TO

1. All general and special taxes for the current fiscal year.
2. Covenants, Conditions, Restrictions, Reservations, Rights Rights of Way of Easements now of record.

Dated: NOVEMBER 6, 2015


MARLYN COX

MAIL TAX STATEMENTS TO:
MARLYN F. COX
320 SOUTH ARDMORE AVENUE, #311
LOS ANGELES, CA 90020



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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

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 LOS ANGELES)

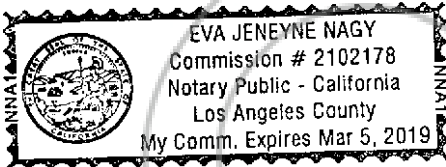
On November 6, 2015 before me, EVA JENEYNE NAGY NOTARY PUBLIC
Date Here Insert Name and Title of the Officer

personally appeared MARLYN COX
Name(s) of Signer(s)

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 Eva Jeneyne Nagy
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Recording requested By
MARLYN COX

Lincoln County - NV
Leslie Boucher - Recorder

Page 1 of 1 Fee: \$40.00
Recorded By: AE RPTT:
Book- 300 Page- 0092

STATE OF NEVADA
DECLARATION OF VALUE FORM

- Assessor Parcel Number(s)
 - 001-260-11
 - 001-260-12
 -
 -

- Type of Property:

a) <input checked="" type="checkbox"/> Vacant Land	b) <input type="checkbox"/> Single Fam. Res.
c) <input type="checkbox"/> Condo/Twnhse	d) <input type="checkbox"/> 2-4 Plex
e) <input type="checkbox"/> Apt. Bldg	f) <input type="checkbox"/> Comm'l/Ind'l
g) <input type="checkbox"/> Agricultural	h) <input type="checkbox"/> Mobile Home
<input type="checkbox"/> Other	

FOR RECORDER'S OPTIONAL USE ONLY

Book: _____ Page: _____

Date of Recording: _____

Notes: Trust on File

- Total Value/Sales Price of Property \$ _____
 Deed in Lieu of Foreclosure Only (value of property) (_____)
 Transfer Tax Value: \$ _____
 Real Property Transfer Tax Due \$ _____

- If Exemption Claimed:
 - Transfer Tax Exemption per NRS 375.090, Section 7
 - Explain Reason for Exemption: Trust Transfer Deed

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 [Signature] Capacity Trustee

Signature _____ Capacity _____

SELLER (GRANTOR) INFORMATION (REQUIRED)

Print Name: MARLYN F. COX

Address: 185 S. Ardmore Ave

City: Los Angeles, CA 90004

State: CA Zip: 90004

BUYER (GRANTEE) INFORMATION (REQUIRED)

Print Name: Marlyn Fortich Cox Living Trust

Address: 185 S. Ardmore Ave

City: Los Angeles

State: CA Zip: 90004

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

Print Name: _____ Escrow #: _____

Address: _____

City: _____ State: _____ Zip: _____