

**RECORDING REQUESTED BY**

First American Title Insurance  
Company of Nevada

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

Leslie Park  
4415 Topaz St  
Las Vegas, NV 89121

Space Above This Line for  
Recorder's Use Only

**A.P.N. 001-260-15**

File No.: 116-2544876 (CC)

**Affidavit - Death of Trustee**

State of Nevada )  
 )ss.  
County of Lincoln )

**Leslie A. Park** ("Declarant") is of legal age, being first duly sworn, deposes and states under penalty of perjury under the laws of the State of Nevada:

1. **James L. Park** ("Decedent") is the person referenced in the attached certified copy of the Certificate of Death who died on **February 26, 2015** at **Henderson Nevada** (city and state of death).
2. Decedent is the same person named as the trustee named in that certain Declaration of Trust dated **February 23, 2015** executed by **James L. Park and Leslie A. Park** as trustor(s) (the "Trust").
3. Decedent as a trustee is the same person who was named as a grantee in that certain **Grant Bargain Sale Deed** dated **February 23, 2015** which was recorded as Instrument No. **0146901** in Book **NA**, Page **NA**, of Official Records of **Lincoln** County, Nevada as legally described as follows:

**Legal Description attached hereto as Exhibit "A" and incorporated herein by this reference**

4. Declarant is the successor trustee under the Trust. The Trust was in effect at the date of the death of the Decedent and has not been revoked. Declarant has consented to act as trustee under the Trust.

Dated:

**DECLARANT:**

Leslie Park  
**Leslie Park**

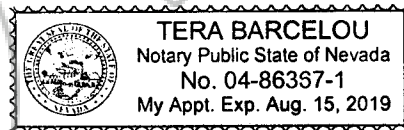
State of Nevada )  
 )ss  
County of Clark )

SUBSCRIBED AND SWORN TO (or affirmed) before me the undersigned, a Notary Public in and for said County Clark and State Nevada this 7 day of June, 2018 by Leslie Park, personally know to me or proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me..

WITNESS my hand and official seal.

*This area for official notarial seal*

Signature [Signature]  
My Commission Expires: Aug 15, 2019



Notary Name: Tera Barcelou Notary Phone: 702-236-0552  
Notary Registration Number: 04-86357-1 County of Principal Place of Business Clark

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF HEALTH - VITAL STATISTICS CERTIFICATE OF DEATH

2015003329 STATE FILE NUMBER

Form with sections: DECEASED, PARENTS, POSITION, TRADE CALL, CERTIFIER, REGISTRAR, CAUSE OF DEATH. Includes fields for name, date, location, cause of death, and certifier information.

STATE REGISTRAR

VRs-Rev-20120523a

"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 authorized by the State Board of Health pursuant to NRS 440.175.

DATE ISSUED: MAR 04 2015

Registrar of Vital Statistics By: [Signature]

This Copy not valid unless prepared on engraved border displaying date, seal and signature of Registrar. SOUTHERN NEVADA HEALTH DISTRICT • P.O. Box 3902 • Las Vegas, NV 89127 • 702-759-1010 • Tax ID # 88-0151573

