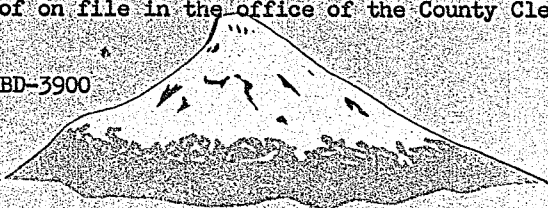


Tax Account No. 3809-32BD-3900



Fee \$8.00

After recording return to:

Grantee

NAME ADDRESS ZIP

Until a change is requested all tax statements shall be sent to the following address.

Grantee

NAME, ADDRESS, ZIP