06-12-95P03:27 RCVD

KNOW ALL MEN BY THESE PRESENTS, That Richard L. Shoemaker and Constance J.

hereinafter called the grantor, for the consideration hereinafter stated, to grantor paid by

Realvest Inc. a Nevada Corporation hereinafter called the grantee, does hereby grant, bargain, sell and convey unto the grantee and grantee's heirs, successors and assigns, that certain real property, with the tenements, hereditaments and appurtenances thereunto 

Lot 56, Block 15, Klamath Falls Forest Estates Highway 66, Plat 1, Klamath County, Oregon

(IF SPACE INSUFFICIENT, CONTIN To Have and to Hold the same unto the grantee a And grantor hereby covenants to and with grantee lawfully seized in fee simple of the above granted premis	e and grantee's heirs, ses, free from all encu	, successors and assigns, that grantor is mbrances
by <u>Richard L. Shoemar</u> This instrument was ack	and every part and laiming under the about transfer, stated in to clude the symbols of the symbo	percel thereof against the lawful claims ove described encumbrances. erms of dollars, is \$1500.00  ***Experiment of the lawful claims of the lawful cl
01		
	My commission	Notary Public for Oregon
Richard/Constance Shoemaker 24762 Apple St. Newhall Cal. 91321  Realvest Inc HC 15,BOX 495-C, Hwy 152, CA6082 Hanover NM. 88041  Grantee's Name and Address  After recording return to (Name, Address, Zip):  Grantee  Until requested otherwise send all tax statements to (Name, Address, Zip):  Grantee	SPACE RESERVED FOR RECORDER'S USE	STATE OF OREGON,  County of

## CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of CALIFORNIA				
County of LOS ANGELE				
On JUNE 8 1995 Date	before me,	GEORGE L. BENNE	TTS, NOTARY PU	BLIC ,
personally appeared Ric Harb	L. Stjoë	Name(s) of Signer(s)	STANCE J.	SHOE MAKER
GEORGE L. BENNETTS COMM. #1040562 Notary Public — Commis LOS ANGELES COUNTY My Comm. Expires OCT 19, 199	who and sam his/ or t exe	ase name(s) is/are subsection acknowledged to me in his/her/their author-their signature(s) he entity upon behalcuted the instrument.  TNESS my hand and	oscribed to the we that he/she/the orized capacity on the instrument of which the p	within instrument ey executed the ies), and that by nt the person(s),
Though the information below is not required	by law, it may prov	ONAL re valuable to persons rely on of this form to another of	ing on the documen	t and could prevent
Description of Attached Doct	- 10 40	ing of this form to another t	iocumoni.	
Title or Type of Document:		TY SEE	: <b>\</b>	1
Document Date: June 8	1005	220	-	6115
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Signer(s) Other Than Named Above:	NON	16	$\frown$	
Capacity(ies) Claimed by Sig	ner(s)		l I	
Signer's Name:		Signer's Name:	$\sim$	
M_Individual		☐ Individual		
☐ Corporate Officer Title(s):		☐ Corporate Office Title(s):	er	
☐ Partner — ☐ Limited ☐ General		☐ Partner — ☐ L		al
<ul><li>☐ Attorney-in-Fact</li><li>☐ Trustee</li></ul>		☐ Attorney-in-Fac	J.	RIGHT THUMBPRINT
☐ Guardian or Conservator	OF SIGNER	Guardian or Co		OF SIGNER Top of thumb here
Other:	lop of that is note	Olifei.		
Signer Is Representing:		Signer Is Represe	enting:	
				L
OF OREGON: COUNTY OF KLAMAT	H: ss.			. 12th
r record at request ofA				