

After recording please return to:
Smile4u, Inc
PO Box 888
Lynden, WA 98264
APN: R-3611-3DO-100; R-3611-2CO-600
Mail Tax Statements to above

State of Oregon, County of Klamath
Recorded 04/16/2004 8:42 a m
Vol M04 Pg 22359-61
Linda Smith, County Clerk
Fee \$ 3.00 # of Pgs 3

DEED

For and in consideration paid, the undersigned, **Sheila G. Peter**, hereinafter referred to as Grantor, hereby conveys all rights and title in the following described real estate to **Smile4u, Inc**, hereinafter referred to as Grantee, legally described as:

LEGAL DESCRIPTION: Nimrod River Park 5th Addition Block 57 Lot 1; Nimrod River Park 5th Addition Block 58 Lot 3

Situate in the County of **Klamath** in the state of **Oregon**.

The Grantor will defend the right and title to the real estate described above against claims against the Grantee arising from, under or through the Grantor only.

The Grantee accepts the real estate in "as is" condition and where presently located including any improvements, structures, easements, or encumbrances. The Grantor makes no representation about the suitability of the real estate for a particular purpose or the conditions therein. The Grantee has had an opportunity for due diligence and is purchasing this property based on Grantee's judgment and inquiry.

If a court of competent jurisdiction finds any provision, clause, or section of this document to be illegal, invalid, or unenforceable as to any circumstance, that finding shall not make the offending provision, clause, or section illegal, invalid, or unenforceable as to any other circumstance. If feasible the offending provision, clause, or section shall be considered modified so that it shall become legal, valid, and enforceable. If the offending provision, clause, or section cannot be so modified, it shall be considered deleted from this document. Unless otherwise required by law, the illegality, invalidity, or unenforceability of any provision, clause, or section this document shall not affect the legality, validity, or enforceability of any other provision, clause, or section of this document.

Dated this 7 day of April, 2004.

X Sheila G. Peter Sheila Kiewer

STATE OF CALIFORNIA

County of Madera } ss.

(INDIVIDUAL ACKNOWLEDGEMENT)

I certify that I know or have satisfactory evidence that Sheila Kiewer is the person who appeared before me, and said person acknowledged that She signed this instrument and acknowledged it to be her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated this 7th day of April, 2004.

Sue Kosmi
Notary Signature

Print Name Sue Kosmi
Notary Public in and for the State of California
My appointment expires: 1-21-07

STATE OF CALIFORNIA)
COUNTY OF Madera) SS.

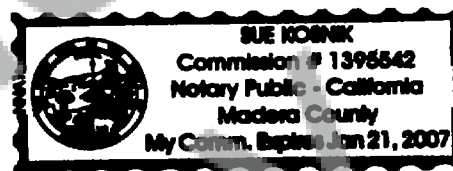
On April 7, 2004 before me, Sue Kosnik

a Notary Public in and for said County and State, personally appeared Sheila Kiewer

personally known to me (or 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.

WITNESS my hand and official seal.

Sue Kosnik
Signature of Notary



STATE OF CALIFORNIA)
COUNTY OF _____) SS.

On _____ before me, _____

a Notary Public in and for said County and State, personally appeared _____

personally known to me (or 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.

WITNESS my hand and official seal.

Signature of Notary

SIGNATURE AFFIDAVIT AND AKA STATEMENT

22361

SIGNATURE STATEMENT

I SHEILA KIEWER

Certify that this is my true and correct signature

Sheila Kiewer

Grantor

Sheila Kiewer

Sample Signature

AKA STATEMENT

I Sheila Kiewer

further certify that I am also known as :

Sheila G. Peter

Name Variation (Print)

Sheila G. Peter

Sample Signature (Variation)

Name Variation (Print)

Sample Signature (Variation)

Name Variation (Print)

Sample Signature (Variation)

Name Variation (Print)

Sample Signature (Variation)

Name Variation (Print)

Sample Signature (Variation)

State of CaliforniaCounty of Madera

On 4-7-04, before me, personally appeared Sheila Kiewer, personally known to me (~~or 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.

WITNESS my hand and official seal.

Signature Sue Kosnik