and the second second	2 9/11/06	
PIF 8/14/06 PC 51-113 FORM No. 633 - WARRANTY DEED (Individual or Corporate).	© 1990-2006 STEVENS-NESS LAW PUBLISHING CO., PORTLAND, OR www.stevensness.com	n
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RTROLAND, INC.		
HC71, Box 495C % P. Browning	2006-018894	
Hanover, NM 88041	Klamath County, Oregon	
Mr. Brian ErentoMalanda Mydress		
11055 African Sunset		
Henderson, NV 89052		
	00004207200600188940020020	
Grantee's Name and Address	09/20/2006 12:13:47 PM Fee: \$26.00	
Mr. Brian E. Mail Ory		
11055 African Sunset	The second secon	
Henderson, NV 89052		
Address Tink		
Until requested otherwise, send all tax statements to (Name, Address, Zip):		
11055 African Sunset		
Henderson, Nv 89052		
atches bon, at obtain		
15t06-427	WARRANTY DEED	
KNOW ALL BY THESE PRESENTS that	oration	,
RTROLAND, INC., A Nevaus Corps	after stated, to grantor paid by	
nulas B Mallows		,
Brian E. Mallory	sell and convey unto the grantee and grantee's heirs, successors and assign	ns,
hereinafter called grantee, does nereby grant, bargatii,	aments and appurtenances thereunto belonging or in any way appertaining	ng,
situated in KLAMATH County,	State of Oregon described as follows to-wit:	•
situated in KLAMATH County,	State of Olegon, described as follows, so was	
KLAMATH COUNTY, OREGON		
To Have and to Hold the same unto grantee an And grantor hereby covenants to and with grant in fee simple of the above granted premises, free from the simple of the above granted premises.	ficient, continue description on reverse) d grantee's heirs, successors and assigns forever. ntee and grantee's heirs, successors and assigns, that grantor is lawfully seiz om all encumbrances except (if no exceptions, so state):	
	and t	that
grantor will warrant and forever defend the premises a persons whomsoever, except those claiming under the The true and actual consideration paid for this actual consideration consists of or includes other prop which) consideration. (The sentence between the symbols (Includes the symbols) and the symbols (Includes the symbols) (Includes the s	and every part and parcel thereof against the lawful claims and demands of above described encumbrances.  transfer, stated in terms of dollars, is \$	the cate
A second	ĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸĸ	~~~~
T '	his instrument on	шол
is a corporation, it has caused its name to be signed a	and its seal, if any, affixed by an officer or other person duly authorized to	) u0
so by order of its board of directors.		
BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON RING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIG UNDER CHAPTER 1, OREGON LAWS 2005 (BALLOT MEASURE 37 INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRINSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS A TIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH PRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFUSES, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARM EST PRACTICES AS DEFINED IN ORS 30.930 AND TO INQUIRE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER	(2004)) THIS (ADD REGULA- THE PERSON THE APPRO- Y APPROVED MING OR FOR- E ABOUT THE R CHAPTER 1.	
STATE OF OREGON, Co	unty of	
This instrument wa	ounty of	

This instrument was acknowledged before me on 9-14-06
Robert M. Tropp Cassardia Notary Public for Oregon

My commission expires

26.-F

as of .

## ALL-PURPOSE ACKNOWLEDGMENT State of California County of \_ before me, Μ. proved to me on the basis of satisfactory personally known to me - OR 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 signatures(s) on the instrument the person(s), or the entity upon behalf of which the CASSANDRA L. LONG Comm. # 1576249 person(s) acted, executed the instrument. NOTARY PUBLIC - CALIFORNIA WITNESS my hand and official seal. **OPTIONAL INFORMATION -**The information below is not required by law. However, it could prevent fraudulent attachment of this acknowledgment to an unauthorized document. DESCRIPTION OF ATTACHED DOCUMENT CAPACITY CLAIMED BY SIGNER (PRINCIPAL) INDIVIDUAL ☐ CORPORATE OFFICER TITLE OR TYPE OF DOCUMENT TITLE(S) PARTNER(S) NUMBER OF PAGES ATTORNEY-IN-FACT TRUSTEE(S) GUARDIAN/CONSERVATOR DATE OF DOCUMENT OTHER: OTHER RIGHT THUMBPRINT SIGNER IS REPRESENTING: NAME OF PERSON(S) OR ENTITY(IES) OF SIGNER

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