

RECORDED AT THE REQUEST OF:

N.R.L.L., EAST, LLC  
ITEM # 116-65

WHEN RECORDED MAIL TO:

N.R.L.L., EAST, LLC  
One Mauchly  
Irvine, CA 92618

MAIL FUTURE TAX STATEMENTS TO:

Ion Petrinca  
13401 Westlake St.  
Garden Grove, CA 92843

2006-020506

Klamath County, Oregon



00006085200600205060010011

10/12/2006 10:10:06 AM

Fee: \$21.00

CORPORATION GRANT DEED

THE UNDERSIGNED GRANTOR(S) DECLARE(S)

DOCUMENTARY TRANSFER TAX - COMPUTED ON FULL VALUE OF PROPERTY CONVEYED \$ 0.00

True and Actual Consideration Paid \$6,600.00

☒ UNINCORPORATED AREA - OR - ☐ CITY OF

AND FOR VALUABLE CONSIDERATION, RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED,

N.R.L.L. East, LLC, a Florida limited liability company

A CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF CALIFORNIA, HEREBY GRANTS TO

Ion Petrinca and Georgeta Petrinca, husband and wife as joint tenants

THE FOLLOWING DESCRIBED REAL PROPERTY IN THE COUNTY OF Klamath,  
STATE OF OREGON

THE NE 1/4 NW 1/4 SE 1/4 NW 1/4 AND N 1/2 NE 1/4 SE 1/4 NW 1/4, AND THAT PART OF N 1/2 NW 1/4 SW 1/4 NE 1/4 THAT LAYS WEST OF THE RIMROCK IN SECTION 4, TOWNSHIP 36 SOUTH, RANGE 12 EAST OF THE WILLAMETTE MERIDIAN, KLAMATH COUNTY, OREGON.

THIS INSTRUMENT WILL NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES.  
APN: 00R356652

DATED 10/5/2006

STATE OF CALIFORNIA )

COUNTY OF ORANGE ) SS



N.R.L.L. EAST, LLC  
a Florida limited liability company

BY Jennyfer Newton, Manager

BY Theresa Ibarra  
Vice President

ON October 06, 2006

BEFORE ME, SARA LOYA

NOTARY PUBLIC, PERSONALLY APPEARED

Theresa Ibarra and Jennyfer Newton

[X] 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

