STATE OF CALIFORN	<u>I</u> A			
COUNTY OF Las L	Sornardini	SS.		
On March 28	Sornardlai 2008 before me, 1	D. Sandorf,	, Notary Public, personall	y appeared
person(s) whose name(s)	personally leaves subscribed to the with and that by signatures(s) on	known to me (or prove in instrument and ack	ed to me on the basis of satisfactory evide mowledged to me that executed the same rson(s) or the entity upon behalf of which	in HER
WITNESS my hand and Signature	Ama model A	Enowy (	R. SANDOVAL Commission # 1541682 Notary Public - California San Bernardino County My Comm. Expires Jan 6, 2009	
My commission expires:	ganuary 6, 2009			
STATE OF CALIFORN	IA			
		SS.		
	, 2008 before me,		, Notary Public, personall	y appeared
person(s) whose name(s) authorized capacity(ies), acted, executed the instru	is/are subscribed to the with and that by signatures(s) on	in instrument and ack	ed to me on the basis of satisfactory evidence mowledged to me that executed the same rson(s) or the entity upon behalf of which	e in
WITNESS my hand and	official seal.			
Signature				
My commission expires:				

## CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California			
County of San Bernardino	∫		
^			
on thrill 2008 before me, Mar personally appeared Arthur J. Plo	ian H. Perez, Notary Public  Here Insert Name and Title of the Officer  Urde and Peggy A. Pla	ourde	
	Name(s) of Signer(s)		
MARIAN H. PEREZ COMM. #1561057 NOTARY PUBLIC - CALIFORNIA SAN BERNARDINO COUNTY My Comm. Expires Mar. 18, 2009	who proved to me on the basis of satisfactor be the person(s) whose name(s) is are subswithin instrument and acknowledged he/she/they executed the same in his/he/their signationstrument the person(s) or the entity upwhich the person(s) acted, executed the instrument of the State of California that the foregoing true and correct.	scribed to the to me that authorized ure(s) on the trument.	
	WITNESS my hand and official seal.		
Place Notary Seal Above	Signature Manager Public Signature of Notary Public	L-	
Though the information below is not required by law, it n			
and could prevent fraudulent removal and rea	ttachment of this form to another document.	l	
Description of Attached Document			
Title or Type of Document: DOYGOLD ON	nd Sale Deed		
Document Date: Hpy 1 11, 900 8	Number of Pages:		
Signer(s) Other Than Named Above:			
Capacity(ies) Claimed by Signer(s)			
Signer's Name:  Individual Corporate Officer — Title(s): Partner — Limited General Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing:	☐ Attorney in Fact	HTTHUMBPRINT OF SIGNER o of thumb here	

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