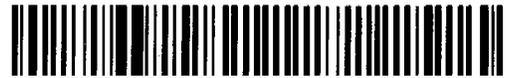


THIS INSTRUMENT WILL NOT ALLOW USE OF TH INSTRUMENT IN VIOLATION OF APPLICABLE LAI REGULATIONS. BEFORE SIGNING OR ACCEPTING PERSON ACQUIRING FEE TITLE TO THE PROPERT APPROPRIATE CITY OR COUNTY PLANNING DEP. USES. (ORS 93.040 (1))

2009-000001

Klamath County, Oregon



00058186200900000010020020

01/02/2009 09:33:19 AM

Fee: \$26.00

ASSESSOR PARCEL No. R-3613-006D0-02600-000

NOTE: Deed prepared by Grantor Below.
NAME: CYNTHIA BAST, TRUSTEE
ADDRESS: 4220 MINNESOTA AVE
CITY/ST/ZIP: FAIR OAKS, CA 95622

WHEN RECORDED MAIL TO (GRANTEE):
MAIL TAX STATEMENTS TO (GRANTEE):
NAME: SPARTAN LAND AND CATTLE COMPANY LLC
ADDRESS: 3900 HANCOCK DR.
CITY/ST/ZIP: SACRAMENTO, CA 95821

SPECIAL WARRANTY DEED SALE PRICE
25200.00

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, the Grantor (seller) whose name(s) is/are: BAST FAMILY REVOCABLE TRUST

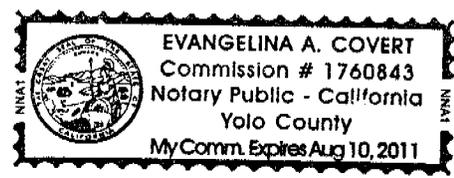
Does convey and specially warrants to: SPARTAN LAND AND CATTLE COMPANY LLC

Grantee, the following described real property free of encumbrances created by the Grantor, situated in: KLAMATH COUNTY, OREGON
SPRAUE RIVER VALLEY ACRES, BLOCK 24, LOT 6

Witness Whereof, my hand has been set on December 22, 2009
"Cynthia Bast, successor Trustee, of the Bast Family Revocable Trust"
Signature on line above _____
Cynthia Bast
Print on line above _____

Signature on line above _____
Print on line above _____

On December 22, 2009 By
Witness my hand and official seal
Evangelina A. Covert
Notary Public in and for said County and State



My commission expires on: August 10, 2011.

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Sacramento

On 12/22/08 before me, Evangelina A. Covert, Notary Public,
(Here insert name and title of the officer)

personally appeared Cynthia Ann Bast

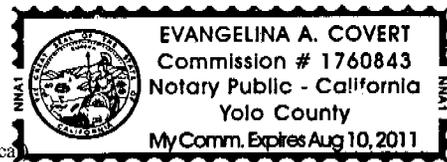
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity(ies), and that by his/~~her/their~~ signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Evangelina A. Covert
Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he/she/they~~, is /~~are~~) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

DESCRIPTION OF THE ATTACHED DOCUMENT

Special Warranty Deed
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date 12/22/08

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
- Corporate Officer
-
(Title)
- Partner(s)
- Attorney-in-Fact
- Trustee(s)
- Other