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. (ORS 93.040 (1))

2009-002107

Klamath County, Oregon ASSESSOR PARCEL No. A-3511-01400-04000-000 NOTE: Deed prepared by Grantor Below. NAME: Dorothy G. Wilborn ADDRESS: 1502 West 130th street 02/13/2009 09:14:35 AM Fee: \$26.00 CITY/ST/ZIP: Compton, Ca 90222 WHEN RECORDED MAIL TO (GRANTEE): MAIL TAX STATEMENTS TO (GRANTEE): NAME: Spartan Land and Cattle Company LLC ADDRESS: 3900 Hancock Drive CITY/ST/ZIP: Sacramento, Ca 95821 SPECIAL WARRANTY DEED FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, the Grantor (seller) whose name(s) is/are: Dorothy G. Wilborn Does conveys and specially warrants to: Spartan Land and Cattle Company LLC Grantee, the following described real property free of encumberances created by the Grantor, situated in: Klamath County, Oregon Oregon Pines, Block 19, lot 15 Witness Whereof, my hand has been set on February 214 Signature on line above Print on line above

On	,20 By	
Witness my hand and offic	ial seal	
Notary Public in and for s	aid County and State	
My commission expires or	: See affach	2-d

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

County of Los angeles	
the within instrument and acknowledged to me th	lence to be the person(s) whose name(s) is/are subscribed to at ke/she/they executed the same in kis/her/their authorized on the instrument the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY under the is true and correct. WITNESS my hand and official seal. Signature of Notary Public	JOHN H. HICKS COMM. #1733076 Notary Public-California LOS ANGELES COUNTY My Comm. Exp. April 18, 2011 (Notary Seal)
DESCRIPTION OF THE ATTACHED DOCUMENT Sectal Warrant Deed (Title or description of attached document) (Title or description of attached document continued) Number of Pages Document Date	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.
CAPACITY CLAIMED BY THE SIGNER Individual (s) Corporate Officer (Title)	 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-scal 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 the capacity claimed by the signer. If the claimed capacity is a

Indicate title or type of attached document, number of pages and date.

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

· Securely attach this document to the signed document

☐ Partner(s)

☐ Other

Trustee(s)

Attorney-in-Fact

State of California