2012-003763 Klamath County, Oregon



04/10/2012 03:18:36 PM

Fee: \$47.00

After recording please return to: Smile4u Inc PO Box 888 Lynden, WA 98264 APN: R292427 Mail Tax Statements to Above

Seller: John & Sheryl Poelking 904 Cordelia Ave Glendora, CA 91740

STATUTORY WARRANTY DEED

For and in consideration paid, the undersigned, John Charles Poelking and Sheryl Lynn Poelking, Trustees of the John and Sheryl Poelking Family Trust, dated November 19, 2007, hereinafter referred to as Grantor, hereby conveys all rights and warrants the title in the following described real estate to Smile4u Inc., a Washington Corporation, hereinafter referred to as Grantee, legally described as:

LEGAL DESCRIPTION: Lot 15 in Block 1, Tract 1110, according to the official plat thereof

Situate in the County of Klamath in the state of Oregon

The Grantee accepts the real estate in "as is" condition and where presently located including any improvements, structures, easements, or encumbrances. The Grantor makes no representation about the suitability of the real estate for a particular purpose or the conditions therein. The Grantee has had an opportunity for due diligence and is purchasing this property based on Grantee's judgment and inquiry.

If a court of competent jurisdiction finds any provision, clause, or section of this document to be illegal, invalid, or unenforceable as to any circumstance, that finding shall not make the offending provision, clause, or section illegal, invalid, or unenforceable as to any other circumstance. If feasible the offending provision, clause, or section shall be considered modified so that it shall becomes legal, valid, and enforceable. If the offending provision, clause, or section cannot be so modified, it shall be considered deleted from this document. Unless otherwise required by law, the illegality, invalidity, or unenforceability of any provision, clause, or section this document shall not affect the legality, validity, or enforceability of any other provision, clause, or section of this document.

This executory contract represents the final agreement between the parties and may not be contradicted by evidence of prior, contemporaneous, or subsequent oral agreements of the Parties. There are no unwritten oral agreements between the Parties.

JURISDICTION AND VENUE

If litigation is necessary to enforce this agreement, the jurisdiction shall be a court of proper jurisdiction in Whatcom County pursuant to the laws of Washington in force on the date of signing. The prevailing party shall be entitled to all legal costs, including but not limited to; court costs, attorney's fees, service fees, filing fees and all other costs associated with litigation.

APPLICABLE LAW

Dated this 30 day of MARCH X John Charles Peer	x Merly Cel
John Charles Poelking	Sheryl Lynn Poelking
STATE OF CALIFORNIA MUS SACWANT SS. (INDIVIDUAL ACKNOWLEDGEMENT) I certify that I know or have satisfactory evidence that Signed this instrument and acknowledged it to be free and voluntary act for the uses and purposes mentioned in the instrument. Dated this Q day of Mach, 2012	
October 31, 2014 No	int Name potary Public in and for the State of y appointment expires:
County of himside ss. (In	NDIVIDUAL ACKNOWLEDGEMENT)
I certify that I know or have satisfactory evidence that Sohn Charles Poelkins is the person who appeared before me, and said person acknowledged that he signed this instrument and acknowledged it to be free and voluntary act for the uses and purposes mentioned in the instrument.	
REFER TO ATTACHED CA ALL-PURPOSE Pri ACKNOWLEDGMENT No	nt Name C. L. Estes Notary Public of appointment expires: Stary Public in and for the State of California appointment expires: Stary Public in Stary 1512 7015

This Agreement and the rights and obligations of the parties hereunder shall be governed by and interpreted, construed and enforced in accordance with the laws of the State of Washington (regardless of

the choice of law principles of Washington or of any other jurisdiction).

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California	
County of <u>Niverside</u>	
On 03 (30 1207 before me, C-L-E	GHES NOTON Publice (Here insert name and title of the officer)
personally appeared John Charles	Poelking,
the within instrument and acknowledged to me that	ence to be the person(s) whose name(s) is are subscribed to at the she/they executed the same in his/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.	e laws of the State of California that the foregoing paragraph
WITNESS my hand and official seal. CLESSIGNATURE OF Notary Public	C. L. ESTES Comm. #1944150 Notary Public-California A Riverside County Comm. Expires Jul 15, 2015
ADDITIONAL OP	TIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT Status Wounds (Title or description of attached document) Dead. (Title or description of attached document continued)	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.
Number of Pages 02 Document Date 03 (30) 707	 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.
(Additional information)	 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, reason if a
Partner(s)	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

Attorney-in-Fact

Trustee(s)

Other