

2013-003173

Klamath County, Oregon



00133298201300031730040048

03/26/2013 09:11:53 AM

Fee: \$52.00

After recording return to:
Bristol Industries, LLC
2550 E Desert Inn Rd #488
Las Vegas, NV 89121

Until a change is requested, tax statements
 shall be sent to the following address:

Bristol Industries, LLC
2550 E Desert Inn Rd #488
Las Vegas, NV 89121

WARRANTY DEED

Douglas S. Stewart, Grantor, whose street address is PO Box 712, City or Town of Shingletown, and State of California conveys and warrants to Bristol Industries, LLC, Grantee, a Nevada Limited Liability Company, whose street address is 2550 E. Desert Inn Rd. #488, City or Town of Las Vegas, and State of Nevada, the following described real property free of encumbrances, except as specifically set forth herein situated in Klamath County, Oregon, to wit:

See Attached Exhibit 'A' Made A Part Hereof By Reference.

This property is free from encumbrances, except: None.

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 197.352. THIS INSTRUMENT DOES 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, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES AS DEFINED IN ORS 30.930 AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 197.352.

The true consideration for this conveyance is \$1.00 and other good and valuable consideration.

Dated this 14 day of March, 2013.

Barbara J. Stewart
 Douglas S. Stewart by Barbara J. Stewart, Power of Attorney

State of California, County of Shasta

This instrument was acknowledged before me on March 14, 2013 by
 Barbara J. Stewart

Rechelle Billy

My commission expires: 4/7/16

Notary Public for the State of California

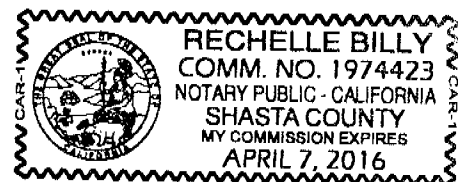


EXHIBIT 'A'

Description: Lot 22 in Block 10 of Oregon Shores, Tract 1053, according to the official plat thereof on file in the office of the County Clerk of Klamath County, Oregon.

Also Known As: Map-Tax Lot Number 3507-006AC-09600

DURABLE POWER OF ATTORNEY

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR AGENT) BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. YOU MAY SPECIFY THAT THESE POWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPACITATED OR INCOMPETENT. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

TO ALL PERSONS, be it known that I, Douglas Scott Stewart, the undersigned Principal, do hereby make and grant a general power of attorney to Barbara J. Stewart, and do thereupon constitute and appoint said individual as my attorney-in-fact/agent.

My attorney-in-fact/agent shall act in my name, place and stead in any way which I myself could do, if I were personally present, with respect to the following matters, to the extent that I am permitted by law to act through an agent:

(NOTICE: The Principal must write his or her initials in the corresponding blank space of a box below with respect to each of the subdivisions (A) through (I) below for which the Principal wants to give the agent authority. If the blank space within a box for any particular subdivision is NOT initialed, NO AUTHORITY WILL BE GRANTED for matters that are included in that subdivision. Cross out each power withheld.)

- | | | |
|-----------|-------------------------------------|---|
| <u>DS</u> | <input checked="" type="checkbox"/> | (A) Real estate transactions |
| <u>DS</u> | <input checked="" type="checkbox"/> | (B) Tangible personal property transactions |
| <u>DS</u> | <input checked="" type="checkbox"/> | (C) Bond, share and commodity transactions |
| <u>DS</u> | <input checked="" type="checkbox"/> | (D) Banking transactions |
| <u>DS</u> | <input checked="" type="checkbox"/> | (E) Business operating transactions |
| <u>DS</u> | <input checked="" type="checkbox"/> | (F) Insurance transactions |
| <u>DS</u> | <input checked="" type="checkbox"/> | (G) Gifts to charities and individuals other than Attorney-in-Fact/Agent
(If trust distributions are involved or tax consequences are anticipated, consult an attorney.) |
| <u>DS</u> | <input checked="" type="checkbox"/> | (H) Claims and litigation |
| <u>DS</u> | <input checked="" type="checkbox"/> | (I) Personal relationships and affairs |

DL [X]
DL [X]
DL [X]
DL [X]
DL [X]
DL [X]
DL [X]

- (J) Benefits from military service
- (K) Records, reports and statements
- (L) Full and unqualified authority to my attorney-in-fact/agent to delegate any or all of the foregoing powers to any person or persons whom my attorney-in-fact/agent shall select
- (M) Access to safe deposit box(es)
- (N) To authorize medical and surgical procedures (Pennsylvania only)
- (O) All other matters

Durable Provision:

- (P) If the blank space in the block to the left is initialed by the Principal, this power of attorney shall not be affected by the subsequent disability or incompetence of the Principal.

Other Terms:

My attorney-in-fact/agent hereby accepts this appointment subject to its terms and agrees to act and perform in said fiduciary capacity consistent with my best interests as he/she in his/her best discretion deems advisable, and I affirm and ratify all acts so undertaken.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

Signed under seal this 12 day of March, (year) 2013

Signed in the presence of:

Rechelle Billy
Witness

Douglas Scott Stewart
Principal

Witness

State of California

County of Shasta

On

3/12/13

before me, Rechelle Billy - Notary Public, appeared

Douglas Scott Stewart, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her/their authorized capacity(ies), and that by his/her signature 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

Signature

Rechelle Billy

(Seal)



Affiant Known Produced ID X
Type of ID UT Drivers
153748925