THIS INSTRUMENT WILL NOT ALLOW USB OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATION. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT. THE PERSON ACQUIRING HER TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY APPROVED USES.

ASSESSOR PARCEL NO. R340919
NOTE: Deed prepared by Grantor below.

NAME: Michael Kincade, Tr ADDRESS: 4720 Loch Lomond Dr CITY/ST/ZIP: Carmichael, CA 95608

WHEN RECORDED MAIL TO (GRANTEE): MAIL TAX STATEMENTS TO (GRANTEE):

NAME: Gokce Capital LLC ADDRESS: 257 Grand Street, # 1180 CITY/ST/ZIP: Brooklyn, NY 11211 2018-013812

Klamath County, Oregon



11/14/2018 09:32:30 AM

Fee: \$87.00

SPECIAL WARRANTY DEED \$1600-

FOR VALUABLE CONSIDERATION, receipt of which is acknowledged, the Grantor (Seller) whose name(s) is/are.

Michael Kincade Trustee of the Michael Kincade Revocable Trust of 2014

Does conveys and specially warrants to:

Gokce Capital LLC

Grantee, the following described real property free of encumberances created by the Grantor, situated in:

Granice, the following described real property free of encumberances created by the Granico, Situated In.	
Klamath County, Oregon	
Lot 2, Block 70, Fifth Addition to Nimrod River Park	
Witness Whereof, my hand has been set on	
Signature in line above Print on line above Print on line above	
State of California, County of	

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached. and not the truthfulness, accuracy, or validity of that document.

County of	. }
Op Joseph 9 Before me,	(Here insert name and title of the officer)
personally appeared	ie Code
	actory evidence to be the person(s) whose
	instrument and acknowledged to me that of/their authorized capacity(iss), and that by
	ent the person(s), or the entity upon behalf of
which the person(s) acted, executed the	e instrument.
the foregoing paragraph is true and cor	' under the laws of the State of California that
the loregoing paragraph is true and cor	······································
WITNESS my hand and official seal.	T. GUNN DAVIS COMM. # 2110157 NOTARY PUBLIC • CALIFORNIA &
	SACRAMENTO COUNTY Comm. Expires MAY 4, 2019
Notary Public Signature (No	otary Public Seal)
ADDITIONAL OPTIONAL INFORMAT	INSTRUCTIONS FOR COMPLETING THIS I ON This form complies with current California statutes regarding nota
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Ackno from other states may be completed for documents being sent to tha
Special accounty Dood	as the wording does not require the California notary to violate Cal law.
(Title or description of attached document)	 State and County information must be the State and County when signer(s) personally appeared before the notary public for acknowledge.
(Title or description of attached document continued)	Date of notarization must be the date that the signer(s) personally must also be the same date the acknowledgment is completed.
Number of Pages Document Date	The notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a comma and then your title (notary public must print his or her name as it appears we commission followed by a commission followed
	 Print the name(s) of document signer(s) who personally appear notarization.
CAPACITY CLAIMED BY THE SIGNER	 Indicate the correct singular or plural forms by crossing off inco he/she/they, is /are) or circling the correct forms. Failure to correct
☐ Individual (s)☐ Corporate Officer	information may lead to rejection of document recording. The notary seal impression must be clear and photographicali
(Title)	Impression must not cover text or lines. If seal impression smud sufficient area permits, otherwise complete a different acknowledge
☐ Partner(s)	 Signature of the notary public must match the signature on file w the county clerk.
☐ Attorney-in-Fact ☐ Trustee(s)	 Additional information is not required but could help acknowledgment is not misused or attached to a different of
Other	 Indicate title or type of attached document, number of page Indicate the capacity claimed by the signer. If the claims
<u></u>	corporate officer, indicate the title (i.e. CEO, CFO, Secreta

INSTRUCTIONS FOR COMPLETING THIS FORM

orm complies with current California statutes regarding notary wording and, led, should be completed and attached to the document. Acknowledgments ther states may be completed for documents being sent to that state so long wording does not require the California notary to violate California notary

- and County information must be the State and County where the document er(s) personally appeared before the notary public for acknowledgment.
- of notarization must be the date that the signer(s) personally appeared which also be the same date the acknowledgment is completed.
- notary public must print his or her name as it appears within his or her nission followed by a comma and then your title (notary public).
- the name(s) of document signer(s) who personally appear at the time of
- ate the correct singular or plural forms by crossing off incorrect forms (i.e. e/they, is /are) or circling the correct forms. Failure to correctly indicate this mation may lead to rejection of document recording.
- notary seal impression must be clear and photographically reproducible. ession must not cover text or lines. If seal impression smudges, re-seal if a cient area permits, otherwise complete a different acknowledgment form.
- ature of the notary public must match the signature on file with the office of ounty 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 with a staple.

www.NotaryClasses.com 800-873-9865