

2022-002845

Klamath County, Oregon

03/07/2022 03:12:02 PM

Fee: \$92.00

After recording return to: Trevor Hoofard Stephanie Hoofard 620 Wildland Dr Klamath Falls, OR 97601

Until a change is requested, all tax statements shall be sent to the following address: Trevor Hoofard Stephanie Hoofard 620 Wildland Dr Klamath Falls, OR 97601

## STATUTORY SPECIAL WARRANTY DEED

Go America LLC, Grantor, conveys and specially warrants to Stephanie Hoffard and Trevor Hoofard, Grantee, the following described real property free of encumbrances created or suffered by the Grantor except as specifically set forth herein:

THE LAND REFERRED TO HEREIN BELOW IS SITUATED IN THE CITY OF KLAMATH FALLS, COUNTY OF KLAMATH, STATE OF OREGON AND IS DESCRIBED AS FOLLOWS:

Lot 24, Block 125, MILLS ADDITION TO THE CITY OF KLAMATH FALLS, according to the official plat thereof on file in the office of the County Clerk, Klamath County, Oregon.

This property is free of encumbrances, EXCEPT:

NONE

The true consideration for this conveyance is One Hundred Fifty-Five Thousand And No/100 Dollars (\$155,000.00).

BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSON'S RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010. 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 THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, 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 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

IN WITNESS WHEREOF, the undersigned have executed this	document on the date(s) set forth below.
Dated this <u>Feb. 11, 2022</u> .	
GO AMERICA LLC	
By: Man Ruel	
Name: Tyrone Reed	
Its: Manage	
A notary public or other officer completing the certificate verifies only the identity of the individual who signed the document to which this certificate attached, and not the truthfulness, accuracy, or validity of that document.	al sis sis sis sis sis sis sis sis sis si
STATE OF	ACUED
COUNTY OF SEE ATT. CALIFO ALL PURPOSE ACK	RNIA NOWLEDGMENT
Dim	2-11-202
The foregoing instrument was acknowledged before its	e me on, 20 by on behalf of GO
AMERICA, LLC who is personally known to me or has identification, and furthermore, the aforemention his/her signature was his/her free and voluntary act instrument.	ed person has acknowledged that
	Notary Public

## California All-Purpose 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.

State of California			
County of San Diego			
on February 11 202° appeared Tyrone Re	≥before me, De	eborah L. Milne , Notary Public, personall	у =-
	to be the per- the within in he/she/they authorized c signature(s) entity upon executed the		to at <del>sir</del> sir ne d,
DEBORAH L. MILNE Notary Public - California San Diego County Commission # 2330293 My Comm. Expires Jui 12, 2024	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.		
	Signature_/	Sbould Thuring	
	OPTION	NAL	_
Though the information below is not required by prevent fraudulent removal	law, it may prove va	aluable to persons relying on the document and coul f this form to another document.	d.
Description of Attached Document		. The form to area of deciment	
Title or Type of Document: Statuto:	n Spie	ind Warranty Dea	2
Document Date: Signer(s) Other Than Named Above:	<i></i>	Number of Pages:	_
Capacity(ies) Claimed by Signer(s)			
Signer's Name: Tyrone Red	,	Signer's Name:	
Individual Corporate Officer – Title(s) Nunasen Partner Limited General Attorney in Fact Trustee Guardian or Conservator Other:	RIGHT THUMBPRINT OF SIGNER 7 Top of thumb here		RIGHTTHUMBPRING OF SIGNER Top of thumb here
Signer is representing: Go Hweila	440	Signer is representing:	