

2022-010268

Klamath County, Oregon

08/24/2022 11:22:01 AM

Fee: \$102.00

Send Tax Statements and Return Document after recording to:

Generation Family Properties

310 4th Ave S Suite 5010 PMB 91990

Minneapolis, MN 55415

WARRANTY DEED

This indenture, made this 18th day of July A.D. 2022, between

THE GRANTOR(S),

- Ryan Kimura and Darren Kimura, as Co-Trustees of the Noriye Kimura Trust U/A dtd 3/31/2015 whose mailing address is 1333 Lyonsville Ln San Jose, CA 95118-3500

for and in consideration of: \$6,039 (Six thousand and thirty-nine dollars and zero cents) grants, bargains, sells, conveys and warranties to the GRANTEE(S):

- Generation Family Properties, LLC, a Minnesota Limited Liability Company with a mailing address of 310 4th Ave S Suite 5010 PMB 91990 Minneapolis, MN 55415,

the following described real estate, situated in the County of Klamath, State of OR:

KLAMATH FALLS FOREST ESTATES SYCAN UNIT BLOCK 16 LOT 3 E1/2 W1/2 and by APNs# R177686

SUBJECT TO: Current taxes, assessments, liens, encumbrances; covenants, conditions, restrictions, rights of way and easements of record the grantor hereby covenants with the Grantee(s) that Grantor is lawfully seized in fee simple of the above granted premises and has good right to sell and convey the same; and the Grantor, his heirs, executors and administrators shall warrant and defend the title unto the Grantee, his heirs and assigns against all lawful claims whatsoever.

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. 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.

Grantor Signatures:

DATED: 7-27-22



Darren Kimura, Co-Trustee of Noriye Kimura Trust U/A dtd 3/31/2015
1333 Lyonsville Ln
San Jose, CA 95118-3500

STATE OF _____

COUNTY OF _____, ss:

This instrument was acknowledged before me on this _____ day of _____, 2022 by Darren Kimura, Co-Trustee of Noriye Kimura Trust U/A dtd 3/31/2015

Notary Public

Signature of person taking acknowledgment

See Attached CA Certificate
Acknowledgement
Jurat

Title (and Rank)

My commission expires _____

Grantor Signatures:

DATED: 7/27/22

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.

State of California }

County of Santa Clara }

On 7/27/2022 before me, Patrick H. Kiely, Notary Public
(Here insert name and title of the officer)

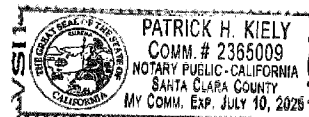
personally appeared Darren Kimura
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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.

Patrick H. Kiely
Notary Public Signature

(Notary Public Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual(s)
☐ Corporate Officer

(Title)

- ☐ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____

INSTRUCTIONS FOR COMPLETING THIS FORM

This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.

- 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.
- 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-seal 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 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.



Ryan Kimura, Co-Trustee of Noriye Kimura Trust U/A dtd 3/31/2015
1333 Lyonsville Ln
San Jose, CA 95118-3500

STATE OF _____
COUNTY OF _____, ss:

This instrument was acknowledged before me on this _____ day of _____, 2022 by Ryan Kimura, Co-Trustee of Noriye Kimura Trust U/A dtd 3/31/2015

Notary Public
Signature of person taking acknowledgment

Title (and Rank)

My commission expires _____

See Attached CA Certificate
Acknowledgement
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State of California }

County of Santa Clara }

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(Here insert name and title of the officer)

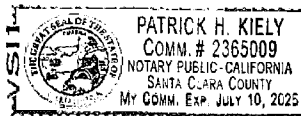
personally appeared Ryan Kimura,
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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.

Notary Public Signature

(Notary Public Seal)



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