1HIS INSTRUMENT WILL NOT ALLOW USE OF TINSTRUMENT IN VIOLATION OF APPLICABLE L REGULATIONS. BEFORE SIGNING OR ACCEPTE PERSON ACQUIRING FEE TITLE TO THE PROPEI APPROPRIATE CITY OR COUNTY PLANNING DE USES. (ORS 93.040 (1))

2023-009941 Klamath County, Oregon



11/17/2023 11:47:29 AM

Fee: \$87.00

ASSESSOR PARCEL NO. #288055 NOTE: Deed prepared by Grantor below.

NAME: Michael Kincade

ADDRESS: 4720 Loch Lomond Dr CITY/ST/ZIP: Carmichael, CA 95608

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

NAME: Eco Climb, LLC

Signature .

ADDRESS: 17114 47th Ave Ct. E CITY/ST/ZIP: Tacoma, WA 98446

SPECIAL WARRANTY DEED

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: Eco Climb, LLC Grantee, the following described real property free of encumberances created by the Grantor, situated in: Klamath County, Oregon The S1/2 W1/2 W1/2 NW1/4 SW1/4 of Section 30, Township 35 South, Range 11 East of the Willamette Meridian. MapTaxLot: 3511-03000-01900-000 Witness Whereof, my hand has been set on Signature in line above Signature on line above Print on line above Print on line above State of California, County of Subscribed and sworn to (or affirmed) before me on this day of proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

SEE CALIFORNIA ALL PURPOSE ACKNOWLEDGMENT.

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.

On $11/15/3023$ before me,	JED VAN WAGNER AND ARY PUBLIC (Here insert name and title of the officer)
personally appeared MICHAEL who proved to me on the basis of satisfa	ALWCADE
name(s) is/are subscribed to the within he/she/they executed the same in his/he	instrument and acknowledged to me that er/their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of
which the person(s) acted, executed the	e instrument.
I certify under PENALTY OF PERJURY the foregoing paragraph is true and cor	under the laws of the State of California that
the foregoing paragraph is true and cor	JED VAN WAGNER
WITNESS my hand and official seal.	COMM. # 2349034 OF SACRAMENTO COUNTYO COMM. EXPIRES MAR. 22. 2025
Notary Public Signature (No.	Otaly Public Seal)
	INSTRUCTIONS FOR COMPLETING THIS FO
ADDITIONAL OPTIONAL INFORMATION	This form complies with current California statutes regarding notary w
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowle from other states may be completed for documents being sent to that sta
SPECIAL WARRANTY DEEN	as the wording does not require the California notary to violate Califor law
(Title or description of attached document)	State and County information must be the State and County where the st
(Title or description of attached document continued)	 stgner(s) personally appeared before the notary public for acknowledg Date of notarization must be the date that the signer(s) personally approximate 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 within commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at
	notarization.
CAPACITY CLAIMED BY THE SIGNER Individual (s)	 Indicate the correct singular or plural forms by crossing off incorrect he/she/they, is /are) or circling the correct forms. Failure to correctly information may lead to rejection of document recording.
☐ Corporate Officer	 The notary seal impression must be clear and photographically impression must not cover text or lines. If seal impression smudges
(Title)	 sufficient area permits, otherwise complete a different acknowledgme Signature of the notary public must match the signature on file with
☐ Partner(s) ☐ Attorney-in-Fact	the county clerk.
Trustee(s)	 Additional information is not required but could help to acknowledgment is not misused or attached to a different doc
Other	 Indicate title or type of attached document, number of pages a Indicate the capacity claimed by the signer. If the claimed corporate officer, indicate the title (i.e. CFO, CFO, Secretary)
2015 Version www NotaryClasses com 800-873 9865	 Securely attach this document to the signed document with a staple.

State of <u>CALIFORNIA</u> }
County of <u>SACRAMENTO</u> }

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

- 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. CFO, CFO, Secretary).
- Securely attach this document to the signed document with a staple.