WHEN RECORDED, MAIL TO:
Opendoor Property Trust I, a Delaware Statutory Trust C/O OS National, LLC
Attn: Bernicia Stewart
3097 Satellite Blvd, Bldg. 700, Ste 400
Duluth, GA 30096

MAIL TAX NOTICES TO: Opendoor Property Trust I 410 N. Scottsdale Rd, Ste 1600 Tempe, AZ, 85288



File No.: 180796-DWP

14276216 B: 11511 P: 4314 Total Pages: 5 08/14/2024 02:41 PM By: dkilpack Fees: \$40.00 Rashelle Hobbs, Recorder, Salt Lake County, Utah Return To: COTTONWOOD TITLE INSURANCE AGENCY, INC. 1996 EAST 6400 SOUTH SUITE 120SALT LAKE CITY, UT 84121

PERSONAL REPRESENTATIVE'S DEED

This Deed made by **Sandie Caye Norris**, as Personal Representative of the Estate of **David Lee Kloer** (also known as **David L. Kloer** and is known on the attached Death Certificate as **David Lee Kloer**),

GRANTOR(S), of Salt Lake City, State of Utah,

to Opendoor Property Trust I, a Delaware Statutory Trust dated February 8, 2019,

GRANTEE(S), of Tempe, State of Arizona

Whereas, Grantor is the qualified personal representative of said estate as shown in the Letters of Administration or Letters Testamentary, filed as Probate Number 243901751 in the Third District Court, Utah:

Therefore, for valuable consideration received, Grantor sells and conveys to Grantee the following described real property in **Salt Lake** County, State of Utah:

Lot 10, Block 2, ROSE PARK PLAT "B" SUBDIVISION, according to the official plat thereof as recorded in the office of the Salt Lake County Recorder.

TAX ID NO.: 08-35-102-003 (for reference purposes only)

SUBJECT TO: Property taxes for the year 2024 and thereafter; covenants, conditions, restrictions and easements of record; and all applicable zoning laws and ordinances.

Dated this 13th day of August, 2024.



Sandie Caye Norris Personal Representative

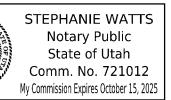
STATE OF UTAH

COUNTY OF DAVIS

On this 13th day of August, 2024, before me, personally appeared Sandie Caye Norris, proved on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and acknowledged before me that he/she/they executed the same.

Stephanie Watts
Signed with **Stavvy**

Notary Public



Notarized remotely via audio/video communication using Stavvy



CERTIFICATE OF DEATH

State File Number: 2024010706

David Lee Kloer

DECEDENT INFORMATION

Date of Death: June 24, 2024 City of Death: Salt Lake City

Age: 74 Salt Lake City, Utah

Place of Birth: Armed Services:

Spouse's Name:

Industry/Business: Residence:

Mother's Name: Facility or Address:

Salt Lake Airport

No

Salt Lake City, Utah Shirley Rodden

642 North 1300 West

Time of Death:

Relationship:

County of Death: Date of Birth: Sex:

April 17, 1950 Male Marital Status: Divorced

Usual Occupation: Operation Manager Education: High School or GED Father's Name: Charles Thurston Kloer

Facility Type: Home

Daughter

13:14 (Found)

Salt Lake

INFORMANT INFORMATION

Name: Sandie Norris Mailing Address:

1036 Summit St, Evanston, Wyoming 82930

DISPOSITION INFORMATION

Method of Disposition: Cremation

Place of Disposition: City View Crematory, Salt Lake City, Utah

Date of Disposition: June 29, 2024

FUNERAL HOME INFORMATION

Dalton-Hoopes Funeral Parlor & Undertakers Inc Funeral Home:

Address 50 West Main Street, PO Box 321, Grantsville, Utah 84029

Funeral Director Gene W Hoopes

MEDICAL CERTIFICATION

Certifying Physician: Thomas T Jones PA, Unversity of Utah Redwood Center, 1525 West 2100 South, Salt Lake City,

Utah 84119

CAUSE OF DEATH

Unspecified Natural Causes [Onset: 1 Hour] Due to (or as a consequence of): Hypertension

Due to (or as a consequence of): Severe generalized anxiety Due to (or as a consequence of): Hypertensive disease

Tobacco Use: Probably Contributed

Medical Examiner Contacted: Yes Autopsy Performed: No Manner of Death: Natural

Date Registered: June 26, 2024 Date Issued: June 27, 2024

> This is an exact reproduction of the facts registered in the Utah State Office of Vital Records and Statistics. Security features of this official document include: Intaglio Border, V & R images in top cycloids, and intaglio microtext. This document displays the date, seal and signature of the Utah State Registrar of Vital Record and Statistics.

Linda S. Wininger, MSW, LCSV State Registrar



Jeff R. Coombs

Director/Health Officer

STATE OF UTAH - DEPARTMENT OF HEALTH - OFFICE OF VITAL RECORDS AND STATISTICS AFFIDAVIT TO AMEND A RECORD

Corrections to a vital record may be made by affidavit but an item on a birth record may be corrected by affidavit only once. A court order is required for gender or subsequent changes. This form is not used with a court order. A court order is necessary to make any corrections to a Delayed Birth Certificate or Death Certificate. This affidavit cannot be used to correct medical information. Many changes, including marital status, require more information; please visit our website or contact our office. Please return any copies of the certificate with this completed affidavit and all supporting documentation. If corrected certificates are reissued within 90 days of issuance, the new certificate fee will be waived but affidavit fees may still apply. This affidavit may be mailed with the correct fees, proof of ID and application for a new certificate.

Mailing Address: Office of Vital Records and Statistics PO Box 141012 Salt Lake City, UT 84114-1012

Physical Address: Office of Vital Records and Statistics 288 North 1460 West Salt Lake City, UT 84116

Contact Info: https://VitalRecords.utah.gov 801-538-6105 vrequest@utah.gov

Affidavit Instructions: Please print or type. Items 1-6: Enter the facts as reported on the current vital record. Item 7: Enter the item number from items 1-6 that will be changed, if applicable. Item 8a: Enter the information as stated on the original record. Item 8b: Enter the correct information as it should be stated. Item 9: Enter the reason the change is necessary. Item 10: Enter the proofs used to support the change. The proofs must match the asserted fact(s) exactly. Proofs must be submitted with the affidavit. Items 11-22: Enter witness information.

Witnesses for Birth Certificate: If the person listed on the record is under 18 years of age, both parents of record MUST sign the affidavit. If only one parent is listed, the second witness MUST be an immediate family member of the listed parent. If the person listed on the record is 18 years of age or older, he/she MUST sign as one of the witnesses. The second witness MUST be their immediate family member.

Witnesses for Death Certificate: The informant must sign as a witness along with an immediate member of the decedent's family. If adding a

Witnesses for Death Certificate: The informant must sign as a witness along with an immediate member of the decedent's family. If adding a spouse, the spouse must sign as a witness. If no immediate family, a person who is knowledgeable of the facts may sign.

	[]BIRTH []DEATH []STILLBI	RTH STATE FILE NUMBER:
A AS	1a. FIRST NAME 1b. MIDDLE NAME	1c: LAST NAME
MATION	2. SEX 3. DATE OF EVENT	4. PLACE OF OCCURRENCE (City and County)
INFORMATION AS REPORTED ON RECORD	5. NAME OF PARENT 1 (Maiden name if applicable)	6. NAME OF PARENT 2 (Maiden name if applicable)
	7. ITEM NO. 8a. FACTS EXACTLY AS ON ORIGINAL RECORD	8b. CORRECT INFORMATION
WHY IS	9.	
CHANGE NEEDED?		/
DOCU- MENTS	10.	
USED	I hereby certify under penalty of perjury, that I have personal knowledge o	of the above facts Subscribed to and Sworn to before me this day of 20
OATH OF FIRST WITNESS (MUST BE 18 OR OLDER)	and that the information given is true and correct. 11a. SIGNATURE OF WITNESS (Must sign in front of Notary) [11b. PRINTED NAME OF WITNESS.	STATE COUNTY
		NOTARY SIGNATURE
	12. DATE SIGNED 13. AGE OF 14. DAYTIME TELEPHONE WITNESS	15. RELATIONSHIP TO 1a.
		s
TH O	16. ADDRESS OF WITNESS	E .
/ 8€		
	I hereby certify under penalty of perjury, that I have personal knowledge	of the above facts Subscribed to and Sworn to before me this day of 20
OATH OF SECOND WITNESS (MUST BE 18 OR OLDER)	and that the information given is true and correct. 17a. SIGNATURE OF WITNESS (Must sign in front of Notary) 17b. PRINTED NAME OF WITNESS	STATECOUNTY
	****	NOTARY SIGNATURE
	18. DATE SIGNED 19. AGE OF WITNESS 20. DAYTIME TELEPHONE	21. RELATIONSHIP TO 1a.
	22. ADDRESS OF WITNESS	
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	S 001 Pay 5/2010	

FILED DISTRICT COURT Third Judicial District

JUL 12 2024

SALT LAKE COUNT

In the District Co	ourt of Utah			
3rd Judicial District Salt Lake County				
Court Address 450 S. State St	- Salt Lake City Ut 84114			
In the Matter of the Estate of Oavid Lee Kloer Deceased	Letters of Administration 243901751 Case Number KOURIS Judge			
1. The appointed personal representative	is: (name).			
 The personal representative is: not supervised. [] supervised. The personal representative may not make any distribution of the estate or exercise the following powers without prior order of the court: 				
Date Printed Name of Clerk or Registra CERTIFY THAT THIS IS A TRUE OPY OF AN ORIGINAL DOCUMENT ON FIVE IN THE THIRD DISTRICT COURT, SALI COUNTY STATE OF UTAH. DATE: DEPUTY COURT CVERK PAGE DEPUTY COURT CVERK	102			