

ATTACHMENT 2 REPLACEMENT LANGUAGE

REPLACE DEDICATION SECTION WITH THE FOLLOWING:

DECLARATION AND DEDICATION

THAT ESTRELLA NORTH L.L.C., A DELAWARE LIMITED LIABILITY COMPANY AS OWNER OF THE PROPERTY SITUATED AT A PORTION OF THE SOUTHEAST QUARTER OF SECTION 28, THE NORTHEAST QUARTER OF SECTION 33, AND THE NORTHWEST QUARTER OF SECTION 34, TOWNSHIP 1 SOUTH, RANGE 2 WEST OF THE GILA AND SALT RIVER BASE AND MERIDIAN, MARICOPA COUNTY, ARIZONA AS SHOWN AND MAPPED HEREON, HEREBY PUBLISHES THIS MAP OF DEDICATION OF WEST MOUNTAIN VISTA DRIVE – PHASE 2 AND DECLARES THAT SAID MAP OF DEDICATION SETS FORTH THE LOCATION AND GIVES THE DIMENSIONS OF THE STREET RIGHT-OF-WAY WITHIN THE ABOVE DESCRIBED PREMISES BEING CONVEYED AND DEDICATED HEREON.

ESTRELLA NORTH L.L.C., A DELAWARE LIMITED LIABILITY COMPANY HEREBY DEDICATES, GRANTS AND CONVEYS TO THE CITY OF GOODYEAR , IN FEE, THE STREET AS SHOWN ON THIS MAP OF DEDICATION AND INCLUDED IN THE PREMISES DESCRIBED HEREIN.

THE PERSON EXECUTING THIS DOCUMENT ON BEHALF OF ESTRELLA NOTH L.L.C., A DELAWARE LIMITED LIABILITY COMPANY, WARRANTS HIS OR HER AUTHORITY TO DO SO AND THAT ALL PERSONS NECESSARY TO BIND ESTRELLA NORTH L.L.C., A DELAWARE LIMITED LIABILITY COMPANY HAVE JOINED IN THIS DOCUMENT.

IN WITNESS WHEREOF: ESTRELLA NORTH L.L.C., A DELAWARE LIMITED LIABILITY COMPANY, AS OWNER, HAS HEREUNTO CAUSED ITS NAME TO BE AFFIXED AND THE SAME TO BE ATTESTED BY THE SIGNATURE OF THE UNDERSIGNED THIS _____ DAY OF _____ 2024.

ESTRELLA NORTH L.L.C.,
A DELAWARE LIMITED LIABILITY COMPANY
BY: ESTRELLA PARTNERS, LP
A DELAWARE LIMITED PARTNERSHIP
ITS: SOLE MEMBER AND MANAGER

BY: GOODYEAR EMR GP, LLC
A DELAWARE LIMITED LIABILITY COMPANY
ITS: GENERAL PARTNER

BY: EMR HARVARD LLC,
AN ARIZONA LIMITED LIABILITY
ITS: ADMINISTRATIVE MEMBER

BY: HARVARD INVESTMENTS, INC.
A NEVADA CORPORATION
ITS: MANAGER

BY: _____
NAME: _____
TITLE: _____

BY: _____
NAME: _____
TITLE: _____

STATE OF ARIZONA)
)SS.
COUNTY OF MARICOPA)

THIS MAP OF DEDICATION OF WEST MOUNTAIN VISTA DRIVE – PHASE 2 WAS ACKNOWLEDGED BEFORE ME THIS _____ DAY OF _____, 2024 BY _____ THE _____ OF HARVARD INVESTMENTS, INC., A NEVADA CORPORATION AND BY _____, THE _____ OF HARVARD INVESTMENTS, INC., A NEVADA CORPORATION, THE MANAGER OF EMR HARVARD LLC, AN ARIZONA LIMITED LIABILITY COMPANY, THE ADMINISTRATIVE MEMBER OF GOODYEAR EMR GP, LLC, A DELAWARE LIMITED LIABILITY COMPANY, THE GENERAL PARTNER OF ESTRELLA PARTNERS, LP, A DELAWARE LIMITED PARTNERSHIP, THE SOLE MEMBER AND MANAGER OF ESTRELLA NORTH LLC, A DELAWARE LIMITED LIABILITY COMPANY, ON BEHALF OF THE LIMITED LIABILITY COMPANY.

NOTARY PUBLIC

INSERT LENDER CONSENT LANGUAGE

LENDER CONSENT

THE UNDERSIGNED, AS THE BENEFICIARY UNDER THAT CERTAIN CONSTRUCTION DEED OF TRUST AND FIXTURE FILING (WITH ASSIGNMENT OF RENTS AND SECURITY AGREEMENT) DATED MAY 9, 2022 RECORDED IN THE OFFICIAL RECORDS OF MARICOPA COUNTY, AZ AT DOCUMENT NO. 2022-0404493 AS MODIFIED BY THAT CERTAIN MEMORANDUM OF MODIFICATION OF CONSTRUCTION DEED OF TRUST AND FIXTURE FILING (WITH ASSIGNMENT OF RENTS AND SECURITY AGREEMENT) DATED DECEMBER 15, 2023 RECORDED IN THE OFFICIAL RECORDS OF MARICOPA COUNTY, AZ AT DOCUMENT NO. 2023-0643690 (COLLECTIVELY THE “DEED OF TRUST”) ENCUMBERING THE PROPERTY SUBJECT TO THIS MAP OF DEDICATION OF WEST MOUNTAIN VISTA DRIVE – PHASE 2, HEREBY EXPRESSLY CONSENTS TO AND JOINS IN THE EXECUTION AND RECORDING OF SAID MAP OF DEDICATION AND DOES HEREBY RELEASE FROM THE DEED OF TRUST THEREBY THAT PORTION OF THE PROPERTY CONVEYED TO THE CITY OF GOODYEAR IN FEE AS SHOWN ON SAID MAP OF DEDICATION. IT IS EXPRESSLY UNDERSTOOD THAT THIS RELEASE APPLIES ONLY TO THE PORTIONS OF THE PROPERTY BEING CONVEYED AND DEDICATED TO THE CITY OF GOODYEAR AND SHALL NOT IN ANY WAY, AFFECT THE DEED OF TRUST UPON THE REMAINDER OF THE PROPERTY SECURED THEREUNDER. THE UNDERSIGNED REPRESENTS THAT HE OR SHE HAS FULL POWER AND AUTHORITY TO EXECUTE THIS LENDER'S CONSENT ON BEHALF OF THE BENEFICIARY UNDER THE DEED OF TRUST.

**WESTERN ALLIANCE BANK,
AN ARIZONA CORPORATION**

ITS: _____

STATE OF _____)
) SS
COUNTY OF _____)

NOTARY PUBLIC	DATE
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MY COMMISSION EXPIRES: _____