This Instrument Prepared by,
Harris A. Gilbert, Esq.
Wyatt, Tarrant & Combs, LLP
2525 West End Avenue
Suite 1500
Nashville, TN 37203
615.244.0020

AFFIDAVIT OF HEIRSHIP

STATE OF TENNESSEE
COUNTY OF DAVIDSON

ELEANOR FAY PATTERSON, a resident of Davidson County, Tennessee, age 47, being first duly sworn according to law, deposes and states that she knows that the following statements are correct and complete:

1. That I married Charlie L. Patterson on September 26, 2004, in Davidson County, Tennessee, who was at that time age 62. A true copy of her marriage certificate is attached hereto and made EXHIBIT A.

2. I and the Decedent, Charlie Louis Patterson, were married as stated above, on September 26, 2004, and remained married until he died in Nashville, Davidson County, Tennessee, on December 31, 2006 (EXHIBIT B).

3. My said husband was previously married to another spouse and the marriage ended in divorce in 1998. They had no children by that marriage.

4. Charlie L. Patterson died a resident of Davidson County, Tennessee. He had no Will. I am his only heir. No children were ever born of his prior marriage or of my marriage to the Decedent. I currently lived with him at our home at 4512 Illinois Avenue, Nashville, Davidson County, Tennessee, 37209.

Davidson County AFFIDAVIT
Recvd: 04/09/07 10:28 7 pgs
Fees:32.00 Taxes:0.00
20070409-0041578

5. There are no other heirs to the Decedent's real property or personal property other than his wife, Affiant Eleanor Fay Patterson.

6. At the time of the death of Charlie L. Patterson, he had no estate other than his home located at 4512 Illinois Avenue, Nashville, Davidson County, Tennessee, he had no funds for burial. I paid for his burial expenses.

7. There are no claims or debts from anyone against the State unpaid. There is no petition for probate of administration pending and none can be filed with respect to same since there was no estate of personal property. At the time of his death, he was the Owner of the property set forth on EXHIBIT C, attached hereto, which gives a full legal description of said property.

8. This Affidavit is given pursuant to T.C.A. 30-2-712, et seq., to reflect the heirship with respect to any real or personal property owned by Charlie Patterson in Davidson County, Tennessee or elsewhere.

FURTHER, AFFIANT SAITH NOT.

This 5 day of April, 2007.

Eleanor Patterson
ELEANOR FAY PATTERSON

Sworn to and subscribed before me this
5th day of April 2007.

Notary Public

HARRIS A. GILBERT
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY, TENN.

My Commission Expires JAN. 24, 2009

45307056.1

Certificate of Marriage

STATE OF TENNESSEE

COUNTY OF DAVIDSON

To Anyone Legally Authorized to Celebrate the Rites of Matrimony
You Are Hereby Licensed to Celebrate the

Rites of Matrimony

Between Charlie Lewis Patterson 62 AGE

and Eleanor Faye Thomas 46 AGE

and for so doing this shall be your warrant.

Given under my hand and official seal, this 23rd day of September

in the year of our Lord Two Thousand Four

Bill Covington
BILL COVINGTON COUNTY CLERK

BY: Margo Green
DEPUTY CLERK

By Virtue of A License from the Davidson County Clerk,

I have this day celebrated the Rites of Matrimony between

The parties herein named, as authorized in the foregoing license.

Given under my hand this the 26th day of September A.D. 2004

Book No. 196

Page No. 180

Rev. Donald T. White
SIGNATURE OF OFFICIANT

Exhibit D

METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

0607418

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): Charles L. Patterson
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): December 31, 2006
4. SOCIAL SECURITY NUMBER: [redacted]-1259
5a. AGE-LAST BIRTHDAY (Years): 64
5b. UNDER 1 YEAR: MOS. / DAYS
5c. UNDER 1 DAY: HOURS / MIN
6. DATE OF BIRTH (Month, Day, Year): Sep 3,1942
7. BIRTHPLACE (City and State or Foreign Country): Nashville, Tennessee
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 [ ] Yes 2 [X] No
9a. PLACE OF DEATH (Check only one): HOSPITAL: 1 [ ] Inpatient 2 [X] ER/Outpatient 3 [ ] DOA; OTHER: 4 [ ] Nursing Home 5 [ ] Residence 6 [ ] Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): Centennial Medical Center
9c. CITY, TOWN, OR LOCATION OF DEATH: Nashville
9d. COUNTY OF DEATH: Davidson
10. MARITAL STATUS: Married, Never Married, Widowed, Divorced (Specify): Married
11. SURVIVING SPOUSE (If wife, give maiden name): Eleanor Golden
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Pastor
12b. KIND OF BUSINESS/INDUSTRY: Church
13a. RESIDENCE-STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 4512 Illinois Avenue
CENSUS TRACT: N
13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No
13f. ZIP CODE: 37209
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No-If yes, specify Cuban, Mexican, Puerto Rican, etc.) [ ] Yes 0 [X] No
15. RACE-American Indian, Black, White, etc. (Specify): Black
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 12; College (1-4 or 5+):

NAME OF DECEDENT: For use by physician or institution

PARENTS

17. FATHER'S NAME (First, Middle, Last): Raymond Patterson
18. MOTHER'S NAME (First, Middle, Maiden Surname): Thelma Holtzelaw

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Eleanor Golden Patterson
19b. RELATIONSHIP TO DECEASED: spouse
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 4512 Illinois Avenue Nashville, Tennessee 37209

DISPOSITION

20a. METHOD OF DISPOSITION: 1 [X] Burial 2 [ ] Cremation 3 [ ] Removal from State 4 [ ] Donation 5 [ ] Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Hills of Calvary
20c. LOCATION-City or Town, State: Nashville, Tennessee
21a. SIGNATURE OF FUNERAL DIRECTOR: [signature]
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 4502
21c. SIGNATURE OF EMBALMER: Tonya Haynes
21d. LICENSE NUMBER OF EMBALMER: 5682
22a. NAME AND ADDRESS OF FUNERAL HOME: Smith Brothers Funeral Directors, Inc. 706 Monroe Street, Nashville, Tennessee 37208
22b. LICENSE NUMBER OF FUNERAL HOME: 809

REGISTRAR

23. REGISTRAR'S SIGNATURE: Linda R. Bowers
24. DATE FILED (Month, Day, Year): January 04, 2007

CERTIFIER

25a. PHYSICIAN - To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner as stated.
1 [X] SIGNATURE AND TITLE OF PHYSICIAN: [signature] T.W. Cain, M.D.
25b. LICENSE NUMBER: 38114
25c. DATE SIGNED (Month, Day, Year): 1/3/2007
26a. MEDICAL EXAMINER - On the basis of examination and/or investigation, in my opinion, death occurred at the date and place, and due to the cause(s) and manner as stated.
2 [ ] SIGNATURE AND TITLE OF MEDICAL EXAMINER
26b. LICENSE NUMBER
26c. DATE SIGNED (Month, Day, Year)

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIFICATE ON WITHIN 48 HOURS

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print)

CAUSE OF DEATH

28. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. (Approximate Interval Between Onset and Death)

SEE INSTRUCTIONS ON OTHER SIDE

IMMEDIATE CAUSE (Final disease or condition resulting in death): a. Cardiopulmonary Arrest — 15 minutes
DUE TO (OR AS A CONSEQUENCE OF):
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST:
b. Cardiac Arrythmia — 15 minutes
DUE TO (OR AS A CONSEQUENCE OF):
c. Cardiomyopathy — 8 years
DUE TO (OR AS A CONSEQUENCE OF):
d.

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.
Congestive Heart Failure; Chronic Obstructive Pulmonary Disease

29a. WAS AN AUTOPSY PERFORMED? 1 [ ] Yes 2 [X] No
29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 [ ] Yes 2 [X] No

30. MANNER OF DEATH: 1 [X] Natural 5 [ ] Pending Investigation 2 [ ] Accident 3 [ ] Suicide 6 [ ] Could not be Determined 4 [ ] Homicide
31a. DATE OF INJURY (Month, Day, Year)
31b. TIME OF INJURY
31c. INJURY AT WORK? 1 [ ] Yes 2 [X] No
31d. DESCRIBE HOW INJURY OCCURRED
31e. PLACE OF INJURY-At home, farm, street, factory, office building, etc. (Specify)
31f. LOCATION (Street and Number or Rural Route Number, City or Town, State)

BIRTH NO. _____

PH 1659 (REV. 6/99)

RDA 1399

I hereby certify the above to be a true and correct copy of the original document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Metropolitan Government of Nashville and Davidson County. Alteration or erasure voids this certification.

Tennessee Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

[redacted]

Tonya Y Foreman
Tonya Y Foreman
Local Registrar

Date Issued JAN 04 2007

THE GREAT SEAL OF THE STATE OF TENNESSEE XVI AGRICULTURE COMMERCE 1796

METROPOLITAN GOVERNMENT NASHVILLE AND DAVIDSON COUNTY TENNESSEE

CERTIFICATION OF VITAL RECORD

Exhibit B

BOOK 7420 PAGE 16

BOX 10

STATE OF TENNESSEE }
COUNTY OF DAVIDSON }

THE ACTUAL CONSIDERATION OR VALUE, WHICHEVER IS GREATER, FOR THIS TRANSFER IS $ 30,500.00

Charlie L. Patterson
Affiant

SUBSCRIBED AND SWORN TO BEFORE ME, THIS THE 3rd DAY OF December

Patricia Spicer Carden
Notary Public

MY COMMISSION EXPIRES 7-13-91
(AFFIX SEAL)

THIS INSTRUMENT WAS PREPARED BY
PATRICIA SPICER CARDEN, ATTY.
736 Fourth Avenue North Suite 200 Nashville, Tennessee 37219

ADDRESS NEW OWNER (S) AS FOLLOWS	Send Tax Bills To/Mortgagee To:	MAP-PARCEL NUMBERS
Charlie L. Patterson (NAME)	Atlantic Coast Mortgage Company (NAME)	12W12680
4512 Illinois Avenue (STREET ADDRESS OR ROUTE NUMBER)	3975 University Drive, Ste. 100/210 (STREET ADDRESS)	091-12-0-
Nashville, TN 37209 (CITY) (STATE) (P. O. ZIP)	Fairfax, VA 22030 (CITY) (STATE) (ZIP)	006.00

FOR AND IN CONSIDERATION OF THE SUM OF TEN DOLLARS, CASH IN HAND PAID BY THE HEREINAFTER NAMED GRANTEES, AND OTHER GOOD AND VALUABLE CONSIDERATIONS, THE RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED, WE, Jakie D. Cook

HEREINAFTER CALLED THE GRANTORS, HAVE BARGAINED AND SOLD, AND BY THESE PRESENTS DO TRANSFER AND CONVEY UNTO Charlie L. Patterson

HEREINAFTER CALLED THE GRANTEES, THEIR HEIRS AND ASSIGNS A CERTAIN TRACT OR PARCEL OF LAND IN DAVIDSON COUNTY, STATE OF TENNESSEE, DESCRIBED AS FOLLOWS TO WIT:

Land in Davidson County, Tennessee, being Lot No. 423 Block 88 on the plan of Plan No. 1 West Nashville, of record in Book 57, pages 74 & 75, Register's Office for said County.

Said Lot No. 423 fronts 35 feet on the northerly margin of Illinois Avenue and extends back between parallel lines with the easterly margin of 46th Avenue North 150 feet to an alley.

Being the same property conveyed to Jakie D. Cook by deed from Wendell L. Smith, Jr. and wife, Sharon M. Smith of record in Book 7307, page 941, Register's Office for Davidson County, Tennessee

This conveyance is made subject to the matters set forth in the above referenced plan of record.

Beverly Cook, wife of Jakie D.Cook joins in this conveyance for the purpose of conveying any interest she may have in subject property by reason of her marital rights.

REGISTER OF DAVIDSON COUNTY, TN
DEC 7 11 13 AM '87

IDENTIFICATION REFERENCE
8 8 2 9 4

( ) unimproved ( ) This is improved (XX) property, known as 4512 Illinois Avenue, Nashville, TN 37209
(House Number) (Street) (P. O. Address) (City or Town) (Postal Zip)

TO HAVE AND TO HOLD the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said GRANTEES, their heirs and assigns, forever, and we do covenant with the said GRANTEES that we are lawfully seized and possessed of said land in fee simple, have a good right to convey it, and the same is unencumbered, unless otherwise herein set out, and we do further covenant and bind ourselves, our heirs and representatives, to warrant and forever defend the title to the said land to the said GRANTEES their heirs and assigns, against the lawful claims of all persons whomsoever. Wherever used, the singular number shall include the plural, the plural the singular, and the use of any gender shall be applicable to all genders.

Witness our hand s this 3rd day of December, 19 87

Jakie D. Cook
Jakie D. Cook

Beverly Cook
Beverly Cook

Exhibit C

BOOK 7420 PAGE 17

INDIVIDUAL ACKNOWLEDGEMENT

State of Tenneesee

County of Davidson

Personally appeared before me, the undersigned, a Notary Public of said county, Jakie D. Cook and wife, Beverly Cook

the within named bargainor(s), with whom I am personally acquainted, or proved to me on the basis of satisfactory evidence, and who acknowledged that they executed the within instrument for the purpose therein contained.

WITNESS my hand, at office, this 3rd day of December, 1987

NOTARY PUBLIC

My commission expires: 7-16-91

CORPORATE ACKNOWLEDGEMENT

State of _____

County of _____

Before me, _____ of the state and county aforesaid, personally appeared _____, with whom I am personally acquainted, or proved to me on the basis of satisfactory evidence, and who, upon oath, acknowledged himself to be President (or other officer authorized to execute the instrument) of the _____, the within named bargainor, a corporation, and that he as such _____, being authorized so to do, executed the foregoing instrument for the purpose therein contained, by signing the name of the corporation by himself as _____

WITNESS my hand and seal, at office in _____

this _____ day of _____, 19____.

NOTARY PUBLIC

My commission expires:

WARRANTY DEED

FROM

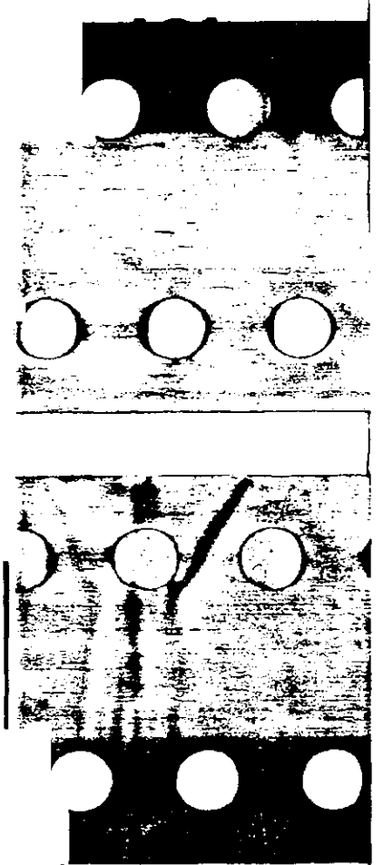
Jakie D. Cook and wife,

Beverly Cook

TO

Charlie L. Patterson

PATRICIA SPICER CARDEN
Attorney at Law
101 Westpark Drive, Suite 350
Brentwood, Tennessee 37027



OFFICIAL RECEIPT

FELIX Z. WILSON, II
REGISTER OF DAVIDSON COUNTY
NASHVILLE, TENNESSEE

RECEIVED OF _____

FOR _____

BOOK 7420 PAGE 18

CD - CONVEYANCE	CC - CERTIFIED COPY	MISC - MISCELLANEOUS
MD - MORTGAGE	REL - RELEASE	CO TAX - STATE TAX CONVEY
WD - WARRANTY DEED	UCC - UNIFORM COMMERCIAL CODE	MO TAX - STATE TAX MORT
TD - TRUST DEED		PRFEE - PROBATE FEE

DATE	SYMBOL	VALUATION	TAX AND FEES	TOTAL

30500.00- CAMT.
55.00 CSTAX
.50 PRFEE
6.00 .DEED
CHECK 91.00-
9313A12/07/87 BAL .01

RECEIPT IS NOT VALID UNTIL CHECK IS PAID BY BANK

8 8 2 9 4

IDENTIFICATION REFERENCE

Dec 7 11 19 AM '87

FELIX Z. WILSON II REGISTER
DAVIDSON COUNTY, TN

No. 42352