Davidson County DEEDQC
Recvd: 03/03/08 15:15 6 pgs
Fees:32.00 Taxes:0.00
20080303-0021124

FROM: Mona Modell Blaylock estate
TO: Juan Tapia Rodriquez, beneficiary under will

Address New Owner:	Send Tax Bills to:	Map-Parcel Numbers
Juan Tapia Rodriquez	Juan Tapia Rodriquez	071-15-0
1211 Joseph Ave.	1211 Joseph Ave.	307.00
Nashville, TN 37207	Nashville, TN 37207	20W 13460

EXECUTOR'S QUITCLAIM DEED

Mona Modell Blaylock died on November 30, 2004. The death certificate is attached as an exhibit. She left a will dated April 26, 2002. The will was admitted to probate on September 6, 2007 in the Seventh Circuit Court for Davidson County, Tennessee, Docket No. 07P1407. The will named Juan Tapia Rodriquez as the executor. The executor is duly qualified. All debts of the decedent have been paid. The Tennessee inheritance tax release for property located at 1211 Joseph Ave., Nashville, TN has been received and is attached to this deed as an exhibit. On September 24, 2007, the State of Tennessee, Bureau of Tenncare released its interest in recovery from the estate and it is attached as an exhibit. The beneficiary of the entire estate was Juan Tapia Rodriquez, Mona Blaylock's husband. The executor by signing this deed releases any right the executor has to recover this property in the event of the subsequent insolvency of this estate. In accordance with the provisions of the will of Mona Modell Blaylock, Juan Tapia Rodriquez, Executor, quitclaims unto Juan Tapia Rodriquez all right, title and interest in the following described real estate in Davidson County, Tennessee:

Being Lot No. 107 on the Map of Sharps and Horn's Second addition to Nashville, as of record in Book 161, Page 53 R.O.D.C., Tennessee.

Said Lot No. 107 fronts 50 feet on the easterly side of Joseph Avenue and runs back between parallel lines 145 feet to an alley.

Being the same property conveyed to Mona M. Blaylock, by deed from L.A. Newman & Company, Inc. a Tennessee Corporation, and recorded in book 8938, page 25.

This instrument and the interest hereby released and quitclaimed are subject to such limitations, restrictions and encumbrances as may affect the premises.

No title search or survey was conducted in connection with this deed. No warranty is made regarding the title.

Witness my hand at Nashville, Tennessee this 15th day of February, 2008.

Estate of Mona Modell Blaylock

By X Juan Tapia Rodriquez
Juan Tapia Rodriquez, Executor

State of Tennessee
County of Davidson

Personally appeared before me, Beverly Delores Fisher, the within named Juan Tapia Rodriquez, Executor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence) who acknowledged that he executed the within instrument for the purposes therein contained.

Witness my hand, at office, this 15th day of February 2008.

Beverly Delores Fisher
Notary Public

BEVERLY DELORES FISHER ★ STATE OF TENNESSEE NOTARY PUBLIC ★ MONTGOMERY COUNTY

My commission expires: My Commission Expires 03-21-11

This instrument prepared by:
Beverly Fisher, Attorney, BPR# 006668
130 Hillcrest Dr., Ste. 109
Clarksville, TN 37043 (931) 645-6061

STATE OF TENNESSEE
COUNTY OF DAVIDSON

The actual consideration for this transfer is $0.

X Juan T Rodriguez
Juan Tapia Rodriquez

Subscribed and sworn to before me this 27th day of February, 2008.

Beverly Delores Fisher
Notary Public

BEVERLY DELORES FISHER ★ STATE OF TENNESSEE NOTARY PUBLIC ★ MONTGOMERY COUNTY

My commission expires: _____

My Commission Expires 03-21-11

METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

0406545

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): Mona Modell Rodriguez
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): November 30, 2004
4. SOCIAL SECURITY NUMBER (of Deceased): 267-40-7865
5a. AGE-LAST BIRTHDAY (Years): 78
5b. UNDER 1 YEAR (Months / Days)
5c. UNDER 1 DAY (Hours / Min.)
6. DATE OF BIRTH (Month, Day, Year): May 26, 1926
7. BIRTHPLACE (City and State or Foreign Country): Red Boiling Springs, TN
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 [ ] ER/Outpatient 3 [ ] DOA; OTHER: 4 [ ] Nursing Home 5 [ ] Residence 6 [X] Other (Specify): Alive Hospice
9b. FACILITY NAME (If not institution, give street and number): 1710 Patterson Street
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): Juan T. Rodriguez
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Server
12b. KIND OF BUSINESS/INDUSTRY: Cafeteria
13a. RESIDENCE-STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 1211 Joseph Avenue
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No
13f. ZIP CODE: 37207
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No-If yes, specify Cuban, Mexican, Puerto Rican, etc.) [ ] Yes [X] No
Specify, if yes:
15. RACE-American Indian, Black, White, etc. (Specify): White
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 medical examiner)

PARENTS

17. FATHER'S NAME (First, Middle, Last): Charlie D. Bilbrey
18. MOTHER'S NAME (First, Middle, Maiden Surname): Jennie E. Davis

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Mr. Juan T. Rodriguez
19b. RELATIONSHIP TO DECEASED: Husband
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 1211 Joseph Avenue Nashville, Tennessee 37207

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): Biles Cemetery
20c. LOCATION-City or Town, State: Hermitage Springs, Tennessee
21a. SIGNATURE OF FUNERAL DIRECTOR: Wendell Byrd
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 2556
21c. SIGNATURE OF EMBALMER: Jason L. Pack
21d. LICENSE NUMBER OF EMBALMER: 5659
22a. NAME AND ADDRESS OF FUNERAL HOME: Woodbine Funeral Home, Inc. 3620 Nolensville Rd., Nashville, Tennessee 37211-
22b. LICENSE NUMBER OF FUNERAL HOME: 396

REGISTRAR

23. REGISTRAR'S SIGNATURE: Lee Ann L. Bowers
24. DATE FILED (Month, Day, Year): December 6, 2004

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:
25b. LICENSE NUMBER: 37615
25c. DATE SIGNED (Month, Day, Year): 12-3-04
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 CERTIFICATION WITHIN 48 HOURS.

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): James Bridges, M.D. 1710 Patterson Street, Nashville, TN 37203

SEE INSTRUCTIONS ON OTHER SIDE

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
IMMEDIATE CAUSE (Final disease or condition resulting in death) → a.	Pancreatic Cancer	
DUE TO (OR AS A CONSEQUENCE OF): b.		
DUE TO (OR AS A CONSEQUENCE OF): c.		
DUE TO (OR AS A CONSEQUENCE OF): d.		

Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST

PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.

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

30. MANNER OF DEATH: 1 [/] Natural 2 [ ] Accident 3 [ ] Suicide 4 [ ] Homicide 5 [ ] Pending Investigation 6 [ ] Could not be Determined
31a. DATE OF INJURY (Month, Day, Year)
31b. TIME OF INJURY
31c. INJURY AT WORK? 1 [ ] Yes 2 [ ] 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)

PH-1659 (REV. 6-99)
BIRTH NO.
RDA 1390

ereby 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 hen printed on security paper showing the red embossed seal of the Metropolitan Government of Nashville and Davidson County. teration or erasure voids this certification.

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

Tonya Y. Ruttlen
Tonya Y. Ruttlen
Local Registrar

DEC 0 6 2004
Date Issued

CERTIFICATION OF VITAL RECORD

TENNESSEE DEPARTMENT OF REVENUE

INHERITANCE TAX RELEASE FOR REAL OR PERSONAL PROPERTY

RECEIVED-22

SEP 11 2007
DEPARTMENT OF REVENUE
PROCESSING DIVISION

NOTICE: THIS DOCUMENT BECOMES AN OFFICIAL STATE RECORD WHEN COMPLETED. INFORMATION SHOULD BE TYPED OR PRINTED CLEARLY IN INK. COMPLETE A SEPARATE INHERITANCE TAX RELEASE FORM FOR EACH PARCEL OF REAL PROPERTY OR FOR EACH BANK OR CORPORATE ...

NAME OF DECEDENT: Mona Modell Blaylock

COUNTY OF RESIDENCE: Davidson

SOCIAL SECURITY NUMBER: 267-40-7865

APPLICATION:

ATTACHED: YES ✓ NO ___

ON FILE: YES ___ NO ___ IF SO DATE FILED ___

The Department of Revenue hereby waives the issuance of notice required by Section 67-8-417, Tennessee Code Annotated and consents to the transfer of the property now in your custody, or standing on your records in the name of the captioned decedent.

DESCRIPTION OF PROPERTY:
(List only one) 1211 Joseph Ave.
Nashville, Tn 37207

MAP / Pa... 07115030700

TENNESSEE DEPARTMENT OF REVENUE INHERITANCE TAX

Beverly Fisher, Attorney
Representative of the Estate
(Not valid unless signed)

RETAIN PINK COPY FOR YOUR RECORDS. RETURN WHITE AND YELLOW COPIES TO THE TENNESSEE DEPARTMENT OF REVENUE, 500 DEADERICK ST., NASHVILLE, TN 37242.

Amy Green ***DEPARTMENTAL USE ONLY***

SEP 12 2007

For Commissioner of Revenue
(By Tax Audit Manager - Audit Division)

Date approved
Inheritance-Gift Tax Section

Beverly Fisher, Attorney
130 Hillcrest Drive, Ste. 109
Clarksville, TN 37043

Release will be mailed to address to the left. Type or print clearly in ink the complete address (include street number and zip code.) Address should be contained within the space provided.

RV-F1401501 (Rev. 6-00)

STATE OF TENNESSEE
BUREAU OF TENNCARE
Third Party Liability Division
310 Great Circle Road, 4th Floor
NASHVILLE, TENNESSEE 37243
Toll Free: 866-389-8444 Fax: 615-413-1941

FILED
2008 FEB -8 AM 9:36
RICHARD R ROOKER, CLERK
D.C.

9/24/2007

JUAN TAPIA RODRIGUEZ
EXECUTOR
1211 JOSEPH AVE.
NASHVILLE, TN 37207

RE: MONA MODELL BLAYLOCK
267407865

Dear JUAN TAPIA RODRIGUEZ:

This letter constitutes notification of the release of the State of Tennessee's Bureau of TennCare against the above estate for the marked reason:

X — This serves as a release of the Bureau of TennCare's interest in recovery from the above referenced estate as required by T.C.A. §71-5-116(c) (2). Based on a review of the information provided on the Request for Release of Estate Recovery Cost Claim form, we do not find long term TennCare benefits paid by the State of Tennessee on behalf of this individual.

____ This release is based upon the surviving spouse deferral, which meets the criteria defined in T.C.A. §71-5-116(c). The State of Tennessee does reserve the right to file a claim for long term care/nursing home services against the estate of the surviving spouse upon the death of the surviving spouse.

____ This release is based upon the decedents age exception, which meets the criteria defined in T.C.A. §71-5-116(c). The State of Tennessee recovers payments made only on behalf of individuals fifty-five years of age or older.

If there are questions, you may contact the Estate Recovery Unit at (866) 389-8444.

Sincerely,

Ron Singh
Manager