This Instrument Prepared By:
BONE MCALLESTER NORTON PLLC
131 Saundersville Road, Suite 130
Hendersonville, TN 37075
615.822.8822

BILL GARRETT, Davidson County
Trans:T20100037328 AFFIDAVIT
Recvd: 06/18/10 15:20 17 pgs
Fees:87.00 Taxes:0.00
20100618-0047825

Owner: **Mrs. Nita La Rue Pennington**
Ms. Judi Dianne La Rue
Ms. Shelley Nicole Floyd Williams
126 Trail East
Hendersonville, TN 37075

Send tax notice to: **Same as above**

AFFIDAVIT OF INHERITANCE

STATE OF TENNESSEE
COUNTY OF DAVIDSON

The undersigned, being duly sworn, deposes and says:

Maxine La Rue Nichols (AKA Maxine T. La Rue), a resident of Nashville, Davidson County, State of Tennessee, who died November 23, 2009 as evidenced by a copy of the death certificate attached as Exhibit A, held as tenants by the entirety with Maynard La Rue (Maynard La Rue died on September 15, 1995, a copy of his death certificate is attached as Exhibit B) interest in the following described real estate:

See Exhibit C

SUBJECT TO Governmental zoning and subdivision ordinances or regulations in effect thereon.

Being the same property conveyed to Maynard La Rue and wife, Maxine T. La Rue, by deed from Francis M. Jackson and wife Patricia R. Jackson, of record in Book 2398, page 595, Register's Office for Davidson County, Tennessee.

REFERENCE is made to prior title recorded in Book 2398, Page 595 in the Register's Office of Davidson County, Tennessee.

The undersigned, Nita La Rue Nichols, Judi Dianne La Rue and Shelley Nicole Floyd Williams each received thirty-three and 33/100 percent ($33^{1/3}\%$) interest in the real estate described above by virtue of being the recipient of the real estate under the provisions of the Decedent's Will, probated in the Seventh Circuit Court (Probate Division) of Davidson County, State of Tennessee, Case No. 10-P 705. A certified copy of an Order of Probate Without Formal Administration entered on May 3, 2010 in the Seventh Circuit Court at Nashville, Tennessee, Probate Division and a certified copy of the Last Will and Testament of Maxine La Rue Nichols are attached as Exhibit D.

There are no debts or encumbrances remaining that are or might become a lien on the interest in the described real estate.

T.C.A. § 67-4-409(a)(3)(D) exempts this instrument from tax and T.C.A. § 67-4-409(a)(5) further provides the valuation oath is unnecessary, the affidavit being used to evidence transfer of title to the property to a beneficiary.

Nita LaRue Pennington
NITA LA RUE PENNINGTON

Judi Dianne LaRue
JUDI DIANNE LA RUE

STATE OF TENNESSEE)
)
COUNTY OF Sumner)

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared NITA LA RUE PENNINGTON, the within named bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person describe din the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that she executed the foregoing instrument for the purposes therein contained as her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said County, on this 28 day of April, 2010.

Judy B. Raymer
NOTARY PUBLIC

JUDY B. RAYMER STATE OF TENNESSEE NOTARY PUBLIC SUMNER COUNTY

My Commission Expires: November 18, 2013

STATE OF TENNESSEE)
)
COUNTY OF Davidson)

Before me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared JUDI DIANNE LA RUE, the within named bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person describe din the foregoing, who signed, sealed and delivered the foregoing instrument in my presence, and who, upon oath, acknowledged that she executed the foregoing instrument for the purposes therein contained as her free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at my office in said County, on this 30th day of April, 2010.

NOTARY PUBLIC

DAVID ROBB MAUK STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY

My Commission Expires: March 04 2013

EXHIBIT

A

STATE OF TENNESSEE
Office of Vital Records

0 9 0 6 6 8 9

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): Maxine LaRue Nichols
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): November 23, 2009
4. SOCIAL SECURITY NUMBER: [redacted]-6047
5a. AGE-LAST BIRTHDAY (Years): 84
5b. UNDER 1 YEAR — MONTHS:
5c. UNDER 1 DAY — HOURS / MIN:
6. DATE OF BIRTH (Month, Day, Year): Sep 14, 1925
7. BIRTHPLACE (City and State or Foreign Country): Hohenwald, 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 X Residence 6 Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): Jackson Park Christian Home
9c. CITY, TOWN, OR LOCATION OF DEATH: Nashville
9d. COUNTY OF DEATH: Davidson
10. MARITAL STATUS (Married, Never Married, Widowed, Divorced) (Specify): Widowed
11. SURVIVING SPOUSE (If wife, give maiden name):
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.): Hairdresser
12b. KIND OF BUSINESS/INDUSTRY: Beauty Industry
13a. RESIDENCE-STATE: TN
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 2610 Highview Dr.
CENSUS TRACT
19a. INSIDE CITY LIMITS? 1 X Yes 2 No
19b. ZIP CODE: 37206
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No - if yes, specify Cuban, Mexican, Puerto Rican, etc.) Yes O No
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): Oliver Austin Talley
18. MOTHER'S NAME (First, Middle, Maiden Surname): Vina Arnold

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Judi LaRue
19b. RELATIONSHIP TO DECEASED: Daughter
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 2128 Sharondale Dr. Unit E Nashville, TN 37215

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): Swiss Cemetery
20c. LOCATION-City or Town, State: Hohenwald, TN
21a. SIGNATURE OF FUNERAL DIRECTOR: Janet Montgomery Funeral Director
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 6245
21c. SIGNATURE OF EMBALMER:
21d. LICENSE NUMBER OF EMBALMER:
22a. NAME AND ADDRESS OF FUNERAL HOME: Nashville Funeral and Cremation Service 210 McMillan St. Nashville, TN 37203
22b. LICENSE NUMBER OF FUNERAL HOME:

REGISTRAR

23. REGISTRAR'S SIGNATURE: Linda L. Bowers, DR
24. DATE FILED (Month, Day, Year): November 24, 2009

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: MD
25b. LICENSE NUMBER: 27211
25c. DATE SIGNED (Month, Day, Year): 11-24-09
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): STRETHMAN 300 20TH Ave N. NASHVILLE TN 37203

CAUSE OF DEATH

SEE INSTRUCTIONS ON OTHER SIDE

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.

Immediate Cause (Final disease or condition resulting in death): a. SUDDEN CARDIAC DEATH — Approximate Interval Between Onset and Death: MINUTES
Due to (or as a consequence of): a. DEMENTIA — 4YRS
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST:
b. Due to (or as a consequence of):
c. 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.

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 X 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: M
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):

BIRTH NO.

PH-1659 (REV. 6/09) RDA 1399

3569140

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 Department of Health. Alteration or erasure voids this certification.

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

Sharon M. Leinbach
STATE REGISTRAR

Joyce L. Jones
Public Health Vital Records Registrar
Department of Public Health Tennessee

NOV 24 2009
Date Issued

CERTIFICATION OF VITAL RECORD

EXHIBIT

B

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER: 95 036993

TYPE/PRINT IN PERMANENT, BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): Maynard H. LaRue
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): September 15, 1995
4. SOCIAL SECURITY NUMBER: [redacted]-0645
5a. AGE - LAST BIRTHDAY (Years): 77
5b. UNDER 1 YEAR: 5c. UNDER 1 DAY:
6. DATE OF BIRTH (Month, Day, Year): Aug. 31, 1918
7. BIRTHPLACE (City and State or Foreign Country): Tennessee
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 [X] No
9a. PLACE OF DEATH (Check only one): Hospital: 1 [X] Inpatient 2 ER/Outpatient 3 DOA; 4 Nursing Home 5 Residence 6 Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): St. Thomas Hospital
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): Maxine Talley
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.)
12b. KIND OF BUSINESS/INDUSTRY: Genesco
13a. RESIDENCE - STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 2610 Highview Dr.
13e. INSIDE CITY LIMITS? 1 [X] Yes 2 [ ] No
13f. ZIP CODE: 37206
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No - If yes, specify Cuban, Mexican, Puerto Rican, etc.) [ ] Yes [X] No
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+):
17. FATHER'S NAME (First, Middle, Last): George LaRue
18. MOTHER'S NAME (First, Middle, Maiden Surname): Maggie Young
19a. INFORMANT'S NAME (Type/Print): Maxine LaRue
19b. RELATIONSHIP TO DECEASED: Wife
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 2610 Highview Dr. Nashville, TN 37206

NAME OF DECEDENT. For use by physician or institution. 0369931995

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): Swiss Cemetery
20c. LOCATION - City or Town, State: Hohenwald, Tn
21a. SIGNATURE OF FUNERAL DIRECTOR: Donald Garrison
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 4308
21c. SIGNATURE OF EMBALMER: Norris Jarrell
21d. LICENSE NUMBER OF EMBALMER: 999
22a. NAME AND ADDRESS OF FUNERAL HOME: Phillips-Robinson Company 2707 Gallatin Road, Nashville, TN 37216
22b. LICENSE NUMBER OF FUNERAL HOME: 331

REGISTRAR

23. REGISTRAR'S SIGNATURE: Maxine H. Jones
24. DATE FILED (Month, Day, Year): September 25, 1995

CERTIFIER

25a. PHYSICIAN - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as stated. 1 [ ] SIGNATURE AND TITLE OF PHYSICIAN
25b. LICENSE NUMBER: 11294
25c. DATE SIGNED (Month, Day, Year): 9-25-95
26. MEDICAL EXAMINER - On the basis of examination and/or investigation, in my opinion, death occurred at the time, 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 CERTIFI-

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): Dr. L. Potter 4230 Harding Rd. Ste. 400 Nashville, TN 37205
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. Approximate

4226952

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 Department of Health. Alteration or erasure voids this certification.

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

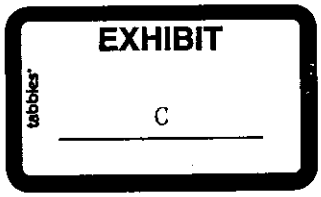
Teresa S. Hendricks
STATE REGISTRAR

Date Issued: May-18-2010

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

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD



Being Lot No. 29 on the Map of Dugger Heights, Section III, as of Record in Book 1635, page 54, Register's Office for Davidson County, Tennessee.

Said Lot No. 29 fronts 98.2 feet on the southerly side of Highview Drive and runs back 210.2 feet on the east line and 189 feet on the west line to a deed line, measuring 68.7 feet thereon.

Being the same property conveyed to Maynard La Rue and wife, Maxine T. La Rue, by deed from Francis M. Jackson and wife Patricia R. Jackson, of record in Book 2398, page 595, Register's Office for Davidson County, Tennessee.

Copy

EXHIBIT

tabbies

D

FILED

IN THE SEVENTH CIRCUIT COURT
FOR THE TWENTIETH JUDICIAL DISTRICT OF TENNESSEE,
AT NASHVILLE, PROBATE DIVISION 2010 MAY 10 AM 10:22

RICHARD R ROOKER, CLERK

IN RE:)
)
ESTATE OF MAXINE LA RUE NICHOLS,) NO. 10P-705
)
Deceased.)

ORDER OF PROBATE WITHOUT FORMAL ADMINISTRATION

BE IT REMEMBERED, this the 10th day of May, 2010 before the Honorable Probate Master, Robert High Bradshaw, Jr., a paper writing purporting to be the Last Will and Testament of the deceased, properly executed and duly witnessed by Maxine La Rue Nichols, was admitted into Probate as the Last Will and Testament of the deceased.

IT APPEARING from the Affidavits or testimony provided that the paper writing was written during the lifetime of the deceased, signed by the witnesses in the presence of and at the request of the deceased, in the presence of each other and as attesting witnesses thereto.

IT FURTHER APPEARING that said instrument was executed by the deceased as and for the Last will and Testament of the deceased, who at the time of execution was of sound mind and disposing memory and whose usual residence was said county, all of which is **ORDERED, ADJUDGED AND DECREED**, by this Court.

IT IS, FURTHER, **ORDERED, ADJUDGED AND DECREED**, that the Last Will and Testament of the deceased shall be admitted into Probate for the express

Copy

purpose of establishing a muniment of title to real property only and the Clerk is hereby directed to file and record same.

IT IS, FURTHER, **ORDERED, ADJUDGED AND DECREED**, that the Decedent had no personal estate to administer, therefore, no formal administration shall be required.

ROBERT HIGH BRADSHAW, JR.
PROBATE MASTER

TO BE ENTERED:

BONE MCALLESTER NORTON PLLC

William R. Wright, # 4024
131 Saundersville Road, Suite 130
Parkside Plaza One
Hendersonville, TN 37075
(615) 780-7977 (direct phone)
(615) 780-7978 (direct fax)
wwright@bonelaw.com

Copy

CERTIFICATE OF SERVICE

As evidenced by my signature below, I certify that a true and exact copy of the foregoing document has been forwarded by facsimile or United States Mail, first class, with sufficient postage, on this the 5th day of May, 2010, to the following interested parties:

Mrs. Nita La Rue Pennington
126 Trail East
Hendersonville, TN 37075

Ms. Judi Dianne La Rue
2128 Sharondale Drive, Unit E
Nashville, TN 37215

Ms. Shelley Nicole Floyd Williams
18820 South Kanaga Loop
Eagle River, Alaska 99577

William R. Wright

Copy

FILED
2008 MAY -6 PM 3:50

LAST WILL AND TESTAMENT
OF
MAXINE LA RUE NICHOLS

ITEM I

1.1 I, Maxine La Rue Nichols, do hereby make and declare the following to be my last will and testament and revoke any prior testamentary instrument of mine.

1.2 I have three children: Nita La Rue Pennington, Judi Dianne La Rue and Shelley Nicole Williams. This is the end of Item I.

ITEM II

2.1 I appoint Nita La Rue Pennington and Judi Dianne La Rue as executors' of my last will. If either of them is unable, unwilling or later ceases to serve as a fiduciary, I appoint John E. Pennington, of Hendersonville, Sumner County, Tennessee, to replace that person as co-executor of my last will.

2.2 Each fiduciary is excused from making bond in any jurisdiction and is excused from making and filing an inventory of my estate in any court.

2.3 I authorize my fiduciaries' in the exercise of a reasonable discretion with respect to all properties, real and personal, at any time forming part of my estate to exercise any of the powers set forth in Tennessee Code annotated Section 35-50-110, which section enumerates the administrative powers that I confer on my fiduciaries'. This is the end of Item II.

ITEM III

3.1 Each lawful debt of mine, my funeral expenses, the expense of administering my estate, and inheritance, estate or other taxes which may be imposed upon my estate, shall be paid by my executors' as soon as possible after my death. I direct that all taxes shall be treated as an expense of my administration, without in any way to pro rate any such items against my beneficiaries'. This is the end of Item III.

ITEM IV

4.1 Except as otherwise directed in Item V, I hereby give, devise and bequeath to my three children all property which I own or have the right to dispose of at my decease and which remains after payment of my debts and funeral expenses, of whatever kind, character and description, real, personal, intangible and mixed and wherever situated. This is the end of Item IV.

Copy

ITEM V

5.1 In the event my children do not survive me I hereby request that my estate be divided equally among my five grandchildren: Jana Pennington, Greg Pennington, Jason Pennington, Lauren Evans and Miles Helton. This is the end of Item V.

IN WITNESS WHEREOF, I have hereunto set my hand this 17th day of February, 2006 and do publish and declare this my Last Will and Testament consisting of three (3) typewritten pages, including the attestation clause and affidavit, in the presence of each and all of the subscribing witnesses whom I have requested to act as such by signing the attestation clause and affidavit below pursuant to the provisions of Tennessee Code Annotated, Section 32-2-110.

Maxine La Rue Nichols

Maxine La Rue Nichols

Copy

ATTESTATION CLAUSE AND AFFIDAVIT

We, the undersigned, being first duly sworn, make oath that Maxine La Rue Nichols, on the day and date first above written and declared and signified to us that the foregoing instrument was her LAST WILL AND TESTAMENT, that she signed said instrument in our sight and presence, that we, at her request and in her sight and presence, and in the presence of each other, then subscribed our names hereto as attesting witnesses; that at the time of execution, the testatrix was more that 18 years of age, of sound mind and disposing memory, and did not appear under any undue influence, and that the undersigned, each being more that 18 years of age, make and sign this ATTESTATION CLAUSE AND AFFIDAVIT at the Testatrix's request on the day and date above written.

Donna Hawkins
Witness

Ken Canary
Witness

Sworn to and subscribed before me this 17th day of February, 2006.

Pamela A Kemp
Notary Public

MY COMMISSION EXPIRES: 1/26/08

PAMELA A. KEMP
NOTARY PUBLIC AT LARGE
DAVIDSON COUNTY, TN

STATE OF TENNESSEE

I, **RICHARD R. ROOKER,** Clerk of the Circuit Court for Davidson County, in the State aforesaid, do hereby certify that the foregoing is a true and correct copy of the FINAL ORDER heretofore entered in the SEVENTH Circuit Court for Davidson County, Tennessee, on the 10 day of MAY , 2010 , in Case Number 10P705 between PENNINGTON, NITA LA RUE ET.AL Petitioner, and NICHOLS, MAXINE LA RUE Respondent, as same remains in the records of said Court.

IN TESTIMONY WHEREOF, I hereunto subscribe my name and affix the seal of said Court, at office, in Nashville, the 11 day of JUNE 2010

RICHARD R. ROOKER, Clerk,

By _____ Deputy Clerk

SEAL

Copy

FILED
2006 MAY -6 PM 3:50

LAST WILL AND TESTAMENT OF MAXINE LA RUE NICHOLS

ITEM I

1.1 I, Maxine La Rue Nichols, do hereby make and declare the following to be my last will and testament and revoke any prior testamentary instrument of mine.

1.2 I have three children: Nita La Rue Pennington, Judi Dianne La Rue and Shelley Nicole Williams. This is the end of Item I.

ITEM II

2.1 I appoint Nita La Rue Pennington and Judi Dianne La Rue as executors' of my last will. If either of them is unable, unwilling or later ceases to serve as a fiduciary, I appoint John E. Pennington, of Hendersonville, Sumner County, Tennessee, to replace that person as co-executor of my last will.

2.2 Each fiduciary is excused from making bond in any jurisdiction and is excused from making and filing an inventory of my estate in any court.

2.3 I authorize my fiduciaries' in the exercise of a reasonable discretion with respect to all properties, real and personal, at any time forming part of my estate to exercise any of the powers set forth in Tennessee Code annotated Section 35-50-110, which section enumerates the administrative powers that I confer on my fiduciaries'. This is the end of Item II.

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3.1 Each lawful debt of mine, my funeral expenses, the expense of administering my estate, and inheritance, estate or other taxes which may be imposed upon my estate, shall be paid by my executors' as soon as possible after my death. I direct that all taxes shall be treated as an expense of my administration, without in any way to pro rate any such items against my beneficiaries'. This is the end of Item III.

ITEM IV

4.1 Except as otherwise directed in Item V, I hereby give, devise and bequeath to my three children all property which I own or have the right to dispose of at my decease and which remains after payment of my debts and funeral expenses, of whatever kind, character and description, real, personal, intangible and mixed and wherever situated. This is the end of Item IV.

Copy

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IN WITNESS WHEREOF, I have hereunto set my hand this 17th day of February, 2006 and do publish and declare this my Last Will and Testament consisting of three (3) typewritten pages, including the attestation clause and affidavit, in the presence of each and all of the subscribing witnesses whom I have requested to act as such by signing the attestation clause and affidavit below pursuant to the provisions of Tennessee Code Annotated, Section 32-2-110.

Maxine La Rue Nichols
Maxine La Rue Nichols

Copy

ATTESTATION CLAUSE AND AFFIDAVIT

We, the undersigned, being first duly sworn, make oath that Maxine La Rue Nichols, on the day and date first above written and declared and signified to us that the foregoing instrument was her LAST WILL AND TESTAMENT, that she signed said instrument in our sight and presence, that we, at her request and in her sight and presence, and in the presence of each other, then subscribed our names hereto as attesting witnesses; that at the time of execution, the testatrix was more that 18 years of age, of sound mind and disposing memory, and did not appear under any undue influence, and that the undersigned, each being more that 18 years of age, make and sign this ATTESTATION CLAUSE AND AFFIDAVIT at the Testatrix's request on the day and date above written.

Donna Hawkins
Witness

Ken Canary
Witness

Sworn to and subscribed before me this 17th day of February, 2006.

Pamela A Kemp
Notary Public

MY COMMISSION EXPIRES: 1/26/08

PAMELA A. KEMP NOTARY PUBLIC AT LARGE DAVIDSON COUNTY, TN

STATE OF TENNESSEE

I, **RICHARD R. ROOKER,** Clerk of the Circuit Court for Davidson County, in the State aforesaid, do hereby certify that the foregoing is a true and correct copy of the LAST WILL AND TESTAMENT heretofore entered in the SEVENTH Circuit Court for Davidson County, Tennessee, on the 10 day of MAY , 2010 , in Case Number 10P705 between PENNINGTON, NITA LA RUE ET.AL Petitioner, and NICHOLS, MAXINE LA RUE Respondent, as same remains in the records of said Court.

IN TESTIMONY WHEREOF, I hereunto subscribe my name and affix the seal of said Court, at office, in Nashville, the 13 day of MAY 2010

RICHARD R. ROOKER, Clerk,

SEAL



By _____

Deputy Clerk