This Instrument Prepared By:
John G. Mitchell, III
Attorney at Law
201 E. Main St., Ste 300
Murfreesboro, TN 37130

Return To:
TRI STAR TITLE & ESCROW, LLC
201 E. MAIN ST, STE 300
MUFREESBORO, TN 37130

SCRIVENER'S AFFIDAVIT

STATE OF TENNESSEE)

COUNTY OF DAVIDSON)

Map/Parcel: 164-24.00CO

Comes now, Rhonda Davis, an employee of Tri Star Title & Escrow, LLC, whose address is 201 E. Main St., Ste 300, Murfreesboro, Tennessee and would state as follows:

Recorded in Instrument Number 20100219-0012945, in the Register's Office of Davidson County, Tennessee, is a **WARRANTY DEED**, dated February 16, 2010, from **LEMMA W. SKIMEHORN and husband, ROBERT G. SKIMEHORN,** has this day bargained and sold and does hereby transfer and convey unto, **SCOTT REESE, 50% undivided interest and ENTRUST TENNESSEE FBO STEVEN ADAMS, Sep IRA 50% undivided interest**, of the Register's Office of Davidson County, Tennessee.

The foregoing contains a scrivener's error in that more information was needed in the Derivation to help ensure that there is no break in the title or problems with future transfers.

Being the same property and legal description conveyed to Jesse E. Williams, and wife, Margaret B. Williams, by deed from Thurman Evans and wife, of record in Book 2882, page 565, Register's Office of Davidson County, Tennessee. Jesse E. Williams, died testate on January 15, 1978, having being predeceased by his wife, Margaret B. Williams and pursuant to the Joint and Several Last Will and Testament of Jesse Edward Williams and wife, Margaret B. Williams, entered in the Probate Court for Davidson County, Tennessee, Docket No. 66687, Will Book 125, page 454, said property was devised one half (1/2) to his daughter, Lemma Elizabeth Williams and one half (1/2) to the said Lemma Elizabeth Williams, Trustee for his then minor and disabled son, James Estell Williams, who died December 21, 2007. Subsequent to the death of the said Margaret Y. Williams, Jesse E. Williams married Nell Williams who survived the said Jesse E. Williams. Nell Williams dissented from the Will of Jesse E. Williams, Deceased, and by order of the Probate Court for Davidson County, Tennessee, entered February 28, 1979, the said Nell Williams was decreed and vested with a one-third interest in and to said property. Nell Williams then sold and conveyed all of her right, title and interest in and to said real property along with her interest in other property of the estate the Court had decreed to be hers, to Lemma W. Skimehorne and her husband, Robert G Skimehorne by Deed and Bill of Sale dated May 23, 1979, and of record in Book 5447, page 401, said Register's Office, the same Lemma W. Skimhorne and Lemma Elizabeth Williams being one and the same person. Likewise Margaret Y. Williams and Margaret B. Williams were one in the same person, and Jesse E. Williams and Jess E. Williams and Jesse Edward Williams are one in the same person. Jesse E. Williams died on December 15, 1978, Margaret B. Williams died on October 07, 1977 and James Estell Williams died on December 21, 2007.

Being the same property conveyed to Lemma W. Skimehorne and husband, Robert G. Skimehorne by deed and bill of sale from Nell Williams of record in Book 5447, page 401, dated May 23, 1979, Register's Office of Davidson County, Tennessee.

FUTHER AFFIANT SAITH NOT,

EXECUTED this 2nd day of July, 2010.

Affiant

BILL GARRETT, Davidson County
Trans:T20100041473 AFFIDAVIT
Recvd: 07/07/10 09:10 4 pgs
Fees:22.00 Taxes:0.00
20100707-0053054

SHERI L. MORGAN
STATE OF TENNESSEE
NOTARY PUBLIC
RUTHERFORD COUNTY
COMMISSION EXPIRES FEBRUARY 18, 2013

STATE OF TENNESSEE)

COUNTY OF DAVIDSON)

Personally appeared before me the undersigned, a notary public in and for the said county and state, the within named Affiant, Rhonda Davis, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that she executed the within instrument for the purposes therein contained.

WITNESS MY HAND AND OFFICIAL SEAL at the office in Davidson County, Tennessee, this the 2nd day of July, 2010.

2/18/13
My Commission Expires

NOTARY PUBLIC

STATE OF TENNESSEE
Office of Vital Records

CERTIFICATE OF DEATH

TENNESSEE DEPARTMENT OF PUBLIC HEALTH — VITAL RECORDS — FILE NO. 77 030432

THIS BECOMES A LEGAL RECORD WHEN PROPERLY EXECUTED AND FILED.

TYPE OR PRINT IN PERMANENT BLUE OR BLACK INK.

1994
52
1994-

1372

1. DECEASED — NAME: Margaret Bianco Williams
2. DATE OF DEATH: 10-7-77
3. SEX: F
4. DATE OF BIRTH: Apr.8-1915
5. AGE: 62
6. COUNTY OF DEATH: Davidson
7. CITY, TOWN, OR LOCATION OF DEATH: Nashville
8. INSIDE CITY LIMITS: Yes
9. HOSPITAL OR OTHER INSTITUTION — NAME: Parkview
10. STATE OF BIRTH: Tenn.
11. CITIZEN OF WHAT COUNTRY: USA.
12. MARRIED, NEVER MARRIED, WIDOWED, DIVORCED: Married
13. SURVIVING SPOUSE: Jesse Williams
14. SOCIAL SECURITY NUMBER: [redacted] 8053
15. MILITARY SERVICE: NO
16. USUAL OCCUPATION: House wife
17. KIND OF BUSINESS OR INDUSTRY: Home Maker
18. RESIDENCE — STATE: Tenn.
19. COUNTY: Davidson
20. CITY, TOWN, OR LOCATION: Antioch
21. INSIDE CITY LIMITS: Yes
22. STREET AND NUMBER: RR 2 Mt View Rd.
23. INCORPORATED: Antioch Tenn 37013
24. FATHER — NAME: Rudolph Bianco
25. MOTHER — MAIDEN NAME: Elisabeth Tat
26. INFORMANT — NAME AND MAILING ADDRESS: Jesse Williams Antioch Tenn. RR 2 Mt View Rd.

IF DEATH NOT ATTENDED BY PHYSICIAN, AUTHORIZED OFFICIAL SIGN HERE.

PERMIT REQUIRED PRIOR TO TRANSPORTATION OF BODY BY COMMON CARRIER OR REMOVAL FROM STATE.

27. MEDICAL EXAMINER — CERTIFICATION: Stuart Spigel, M. D.
28. MAILING ADDRESS: 1801 Church St., Nashville, Tennessee 37203
29. BURIAL, CREMATION, REMOVAL: Burial
30. DATE: 10-9-77
31. CEMETERY OR CREMATORY — NAME: Roselawn
32. LOCATION: Murfreesboro Tenn.
33. FUNERAL HOME — NAME AND ADDRESS: Ellis Funeral Home.2627 Nolensville Rd. Nashville, Tennessee
34. REGISTRAR — SIGNATURE: Estelle D Bird 10-17-77

PHLM FORM NO. 69-16 REVISED 11-72

3753546

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

Date Issued Jan-27-2010

CERTIFICATION OF VITAL RECORD

STATE OF TENNESSEE
Office of Vital Records

3577154

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

1. DECEDENT'S NAME (First, Middle, Last): JAMES ESTELL WILLIAMS
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): December 21, 2007
4. SOCIAL SECURITY NUMBER: [redacted]2689
5a. AGE-LAST BIRTHDAY: 53
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): May 7, 1954
7. BIRTHPLACE (City and State or Foreign Country): UNKNOWN,
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 [X] No
9. PLACE OF DEATH (Check only one): 1 Inpatient 2 ER/Outpatient 3 DOA 4 [X] Nursing Home 5 Residence 6 Other (Specify)
9a. FACILITY NAME (If not institution, give street and number): HQM OF NASHVILLE
9b. CITY, TOWN, OR LOCATION OF DEATH: NASHVILLE
9c. COUNTY OF DEATH: DAVIDSON
10. MARITAL STATUS (Married, Never Married, Widowed, Divorced (Specify)): Never Married
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): NEVER WORKED
12b. KIND OF BUSINESS/INDUSTRY:
13a. RESIDENCE-STATE: TN
13b. COUNTY: DAVIDSON
13c. CITY, TOWN OR LOCATION: ANTIOCH
13d. STREET AND NUMBER OR RURAL LOCATION: 6161 RICB RD. # 336
13e. INSIDE CITY LIMITS? 1 [X] Yes 2 No
13f. ZIP CODE: 37013
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No; if Yes, specify Cuban, Mexican, Puerto Rican, etc.) 1 Yes 2 [X] No
15. RACE-American Indian, Black, White, etc. (Specify): White
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 0; College (1-4 or 5+):
17. FATHER'S NAME (First, Middle, Last): UNKNOWN
18. MOTHER'S NAME (First, Middle, Maiden Surname): UNKNOWN
19a. INFORMANT'S NAME (Type/Print): SCOTT BRUNETTE
19b. RELATIONSHIP TO DECEASED: CONSERVATOR
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 6234 BRESSLYN RD. NASHVILLE, TN 37205
20a. METHOD OF DISPOSITION: 1 Burial 2 Cremation 3 Removal from State 4 Donation 5 Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): MUSIC CITY CREMATORY
20c. LOCATION-City or Town, State: NASHVILLE TN
21a. SIGNATURE OF FUNERAL DIRECTOR: [signature]
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 5955
21c. SIGNATURE OF EMBALMER:
21d. LICENSE NUMBER OF EMBALMER:
22a. NAME AND ADDRESS OF FUNERAL HOME: Marshall-Donnelly-Combs Funeral Home, 201 25th Ave. North, Nashville, TN 37203-
22b. LICENSE NUMBER OF FUNERAL HOME: 40
23. REGISTRAR'S SIGNATURE:
24. DATE FILED (Month, Day, Year): December 31, 2007

25. 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: 38242
25c. DATE SIGNED (Month, Day, Year): 12/31/07

26a. MEDICAL EXAMINER - On the basis of investigation, and/or autopsy, 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): [illegible]

28. PART I. Enter the disease, 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): [illegible] DUE TO (OR AS A CONSEQUENCE OF):
Approximate Interval Between Onset and Death:

Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST:
b. [illegible] 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 Natural 2 Pending Investigation 3 Accident 4 Suicide 5 Could not be Determined 6 Homicide
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):

FH-1853 (REV. 3/98)
BIRTH NO.
RDA 1996

3577154

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

Tonya Y. Foreman
Tonya Y. Foreman, Local Registrar
Davidson County, Tennessee

1/20/2010
Date Issued

CERTIFICATION OF VITAL RECORD

JAN-28-2010 10:42 FROM:ADAMS MOVING CO 6155019487 TO:4253351 P.4

STATE OF TENNESSEE
Office of Vital Records

19094
34
19094-

CERTIFICATE OF DEATH

TENNESSEE DEPARTMENT OF PUBLIC HEALTH
VITAL RECORDS

78 037192

THIS BECOMES A LEGAL RECORD WHEN PROPERLY EXECUTED AND FILED.

5289

TYPE OR PRINT IN PERMANENT BLACK INK.

DECEDENT

USUAL RESIDENCE WHERE DECEASED LIVED

PERMIT REQ TRANSPORTA COMMON C MOVAL FROM

IF DEATH NOT ATTENDED BY PHYSICIAN, AUTHORIZED OFFI... SIGN HERE. ANY PHYSI... OR MEDICAL EXAMINER ...CUTING CERTIFICATE MUST

Jesse Edward Williams					12-15-78
66			Aug. 25-1912	W	M
Davidson	Donelson	Yes	Donelson Hospital		4
Tenn. 43	USA.	Married	Nell Ford Williams		
[redacted]9680	WW2	Security Guard. Retired	General Hospital		
Tenn	Davidson	Antioch	RR2 MtView Rd.	Yes	
Walter Williams	Lemma Henry	Nell F. Williams, RR2 MtView Rd, Antio			
Burial	12-17-78	Roselawn	Murfreesboro Tenn.		
Clarence Ellis	1341	Clarence Ellis.	2670		
Ellis Funeral Home 2627 Olensville Rd Nashville, Tenn. 37211		Esther D. Groh	12-22-78		
T. E. Simpkins, M.D.		1120 Dickerson Rd., Nashville, Tn. 37207		12-20-78	

3753541

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

Date Issued Jan-27-2010

CERTIFICATION OF VITAL RECORD

FEB-2-2010 08:14 FROM:ADAMS MOVING CO 6155019487 TO:4253351 P.1