Owner: Larry E. Brown, Sr.	Prepared by: David J. Waynick Attorney at Law 211 Donelson Pike, Suite 2 Nashville, Tennessee 37214
Send tax notice to: Larry E. Brown, Sr. 215 Mapleview Street Smyrna, Tennessee 37167-2416	Map & Parcel No.: 08411014000

AFFIDAVIT OF INHERITANCE (REAL ESTATE)

Davidson County AFFIDAVIT
Recvd: 01/26/11 12:49 9 pgs
Fees:47.00 Taxes:0.00
20110126-0007267

STATE OF TENNESSEE

COUNTY OF DAVIDSON

The undersigned, being duly sworn, deposes and says:

PEGGY ANN BROWN, a resident of Davidson County, State of Tennessee, who died on November 17, 2009 as evidenced by a copy of the death certificate, release of the State of Tennessee's Bureau of TennCare, and Tennessee Department of Revenue Inheritance Tax Closing Letter attached as collective Exhibit A, held a fee simple interest in the following described real estate:

> BEING Lot No. 247 on the Plan of a Subdivision of C. R. Quarles Lands – Maplecrest as of record in Book 1835, Page 28, Register's Office for Davidson County, Tennessee.
>
> BEING the same property conveyed to Charles E. Brown et ux Peggy A. Brown by deed from William Joseph Huber et ux Cynthia Diane Huber of record in Book 5089, Page 27, Register's Office for Davidson County, Tennessee.
>
> THIS conveyance is subject to any and all existing easements of record.
>
> This is improved property known as: 2302 Aubrey Drive, Nashville, TN 37214.

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

REFERENCE is made to prior title recorded in Book 5089, Page 27 in the Register's Office of Davidson County, Tennessee.

The undersigned received the following 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 Probate Court of Davidson County, State of Tennessee, Case No. 10P1274: ***an undivided, fee simple interest in 2302 Aubrey Drive, Nashville, Tennessee 37214.***

The Probate Estate has been closed, and a copy of the Order is attached as Exhibit B.

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.

Larry E. Brown Sr.
Larry E. Brown, Sr.

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 Larry E. Brown, Sr., the within named bargainor, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in 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 3rd day of December, 2010.

Notary Public

My commission expires: _____

REBECCA WAYNICK
STATE OF TENNESSEE NOTARY PUBLIC
COUNTY OF WILSON

MY COMMISSION EXPIRES:
JULY 24, 2011

EXHIBIT A

TENNESSEE DEPARTMENT OF REVENUE

Inheritance Tax Closing Letter (This is not a bill for tax due)

November 12, 2010

ESTATE OF PEGGY A BROWN
ATTN: DAVID J WAYNICK
211 DONELSON PIKE STE 2
NASHVILLE TN 37214-2914

Account Type:	INHERIT TX
Account No.:	441497883
Date of Death:	November 17, 2009
County:	DAVIDSON
SSN:	XXX-XX-4947

A sworn return for inheritance tax has been filed with this department by the representative of the above estate.

As provided in Section 67-8-420, Tennessee Code Annotated, this receipt or certificate authorizes the court of the county in which such estate was administered to permit a final settlement or accounting by the estate representative.

The liability, as denoted in this closure letter, has been paid to the State of Tennessee. This is not a bill:

Inheritance Tax:	$0.00
Estate Tax:	$0.00
Interest:	$0.00
Penalty:	$0.00
Total:	$0.00

DETACH BELOW AND RETAIN FOR YOUR RECORDS

TENNESSEE DEPARTMENT OF REVENUE

ESTATE OF PEGGY A BROWN
ATTN: DAVID J WAYNICK
211 DONELSON PIKE STE 2
NASHVILLE, TN 37214-2914

November 12, 2010

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Inheritance Tax:	$0.00
Estate Tax:	$0.00
Interest:	$0.00
Penalty:	$0.00
Total:	$0.00

EXHIBIT A CONTINUED

STATE OF TENNESSEE
Office of Vital Records

565611

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER: 565611

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last): Peggy Ann Brown
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): November 17, 2009
4. SOCIAL SECURITY NUMBER:
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): April 19, 1931
7. BIRTHPLACE (City and State or Foreign Country): Nashville, Tennessee
8. ARMED FORCES? 1 Yes 2 X No
5a. PLACE OF DEATH (Check only one): HOSPITAL: 1 Inpatient 2 ER/Outpatient 3 DOA; OTHER: 4 Nursing Home 5 Residence 6 X Other (Specify): Hospice
9b. FACILITY NAME (If not institution, give street and number): Alive Hospice @ 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)): 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.): Home Maker
12b. KIND OF BUSINESS/INDUSTRY: Own Home
13a. RESIDENCE-STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 2302 Aubrey Dr.
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 X Yes 2 No
13f. ZIP CODE: 37214
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): 12; College (1-4 or 5+):

NAME OF DECEDENT: For use by Physician or Institution

PARENTS

17. FATHER'S NAME (First, Middle, Last): Unknown
18. MOTHER'S NAME (First, Middle, Maiden Surname): Unknown

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Lawrence Brown
19b. RELATIONSHIP TO DECEASED: Son
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 215 Mapleview St., Smyrna, TN 37167

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): Mount Olivet Cemetery
20c. LOCATION City or Town, State: Nashville, Tennessee
21a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Wayne Stephens
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 5243
21c. SIGNATURE OF EMBALMER: ▶ n/a
21d. LICENSE NUMBER OF EMBALMER:
22a. NAME AND ADDRESS OF FUNERAL HOME: Mount Olivet Funeral Home & Cemetery 1101 Lebanon Rd., Nashville, Tennessee 37210
22b. LICENSE NUMBER OF FUNERAL HOME: 970

REGISTRAR

23. REGISTRAR'S SIGNATURE: ▶ Tonya Y. Foreman, Dr.
24. DATE FILED (Month, Day, Year): December 3, 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: ▶ Murfee P. Leonard
25b. LICENSE NUMBER: 35904
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): Murfee P. Leonard 4220 Hardtop Rd Nashville, TN 37205

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. Metastatic adenocarcinoma of unknown primary	unknown
	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. DUE TO (OR AS A CONSEQUENCE OF):	
	c. DUE TO (OR AS A CONSEQUENCE OF):	
	d.	

SEE INSTRUCTIONS ON OTHER SIDE

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 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 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):

BIRTH NO.

RH-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 Department of Health. Alteration or erasure voids this certification.

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

565611

Sharon M. Leinbach
STATE REGISTRAR

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

DEC 03 2009
Date Issued

CERTIFICATION OF VITAL RECORD

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

RECEIVED
OCT 18 2010

10/14/2010

DAVID J. WAYNICK
LEGAL COUNSEL
211 DONELSON PIKE, STE.2
NASHVILLE, TN 37214

RE: PEGGY A. BROWN

Dear DAVID J. WAYNICK:

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

EXHIBIT B

THE CIRCUIT COURT OF DAVIDSON COUNTY, TENNESSEE (PROBATE DIVISION)

2011 JAN 19 PM 2:18

RICHARD R. ROOKER, CLERK

D.C.

THE ESTATE OF PEGGY ANN BROWN, **Docket No. 10P1274**
Deceased.

LARRY E. BROWN, SR.,
Petitioner / Executor.

ORDER TO CLOSE ESTATE WITHOUT DETAILED ACCOUNTING

Based on examination of the Personal Representative's Statement and the Residuary Distributees' Approvals, the Court finds the following:

1. Petitioner is the qualified Personal Representative of this Estate;
2. The Estate is solvent;
3. The Estate is fully administered;
4. Each claim filed against the Estate has been paid. All other debts have been paid;
5. All inheritance and estate taxes due to the State of Tennessee have been paid. All US Estate taxes have also been paid;
6. This estate has been properly distributed; and,
7. All the residuary distributees and legatees of this Estate agree to close the Estate without a detailed accounting.

Based on these findings, the Court ORDERS the Estate closed without a detailed accounting, discharges the Personal Representative and his surety, if any, and directs no copy of this final Order to be sent to each Distributee and Legatee or the Personal Representatives.

ENTERED THIS 19th DAY OF Jan., 2010.

PROBATE MASTER

APPROVED FOR ENTRY:

David J. Waynick, BPR #012293
Attorney at Law
211 Donelson Pike, Suite 2
P.O. Box 148058
Nashville, TN 37214
(615) 885-5707

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing Order to Close Without Detailed Accounting has been sent via U.S. Mail, postage prepaid, to the following, this the 7th day of December, 2010:

Larry E. Brown, Sr.
215 Mapleview Street
Smyrna, Tennessee 37167-2416

Lawrence E. Nathan
561 Forest Parkway East
Largo, Florida 33771-1416

Debra Brown Nathan
561 Forest Parkway East
Largo, Florida 33771-1416

Sherry L. Cossette
215 Mapleview Street
Smyrna, Tennessee 37167-2416

David J. Waynick

CERTIFICATION

I, Rebecca Waynick, do hereby make oath that I am the custodian of the electronic version of the attached document tendered for registration herewith and that this is a true and correct copy of the original document executed and authenticated according to law.

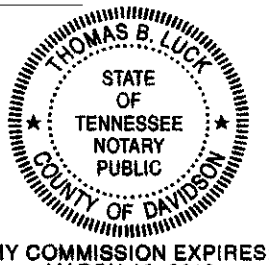
Rebecca Waynick

State of Tennessee
County of Davidson

On this 26th day of January, 2011, personally appeared before me, Thomas B. Luck, a notary public for this county and state, Rebecca Waynick, who acknowledges that this certification of an electronic document is true and correct and whose signature I have witnessed.

Thomas B. Luck

My Commission Expires:



MY COMMISSION EXPIRES:
MARCH 10, 2012