BILL GARRETT, Davidson County
Trans:T20110007786 DEEDQC
Recvd: 02/07/11 10:23 8 pgs
Fees:42.00 Taxes:0.00
20110207-0010513

This Document Prepared By:
New England Title
841 Main Street
Tewksbury, MA 01876

~~Mail To:~~ Title Source, Inc.
1450 West Long Lake
Suite 400
Troy, Michigan 48098

Rec 3rd 76953167

When Recorded Return To:
Indecomm Global Services
2925 Country Drive
St. Paul, MN 55117

55014008

QUITCLAIM DEED 8
920386

(3)

Tax Id Number(s): 117030H20400CO

FOR AND IN CONSIDERATION of the sum of Ten Dollars ($10.00), and other good and valuable consideration, receipt of which is hereby acknowledged, We, Ann B. Packer and Steven J. Packer, wife and husband, hereinafter referred to as Grantor,

do hereby quitclaim and convey unto STEVEN J. PACKER, TRUSTEE OF THE PACKER FAMILY REVOCABLE TRUST, dated June 16, 1988, hereinafter referred to as Grantee, his heirs and assigns, all of our right, title and interest in and to a certain tract or parcel of land located in Davidson County, Tennessee and described as follows:

Tax Id Number(s): 117030H20400CO

See Exhibit A - for Certificate of Trust.

Land Situated in the County of Davidson in the State of TN

Being Unit 204, on the Plan of THE ENCLAVE AT HILLSBORO VILLAGE Condominiums, as established under Master Deed of record in Instrument 20051005-0119789 as amended at Instrument 20060210-0016562 and Instrument No. 20060919-0116052, in the Register's Office, Davidson County, Tennessee, to which master deed reference is hereby made for a more particular description of said unit.

Being the same property conveyed to STEVEN J. PACKER, TRUSTEE OF THE PACKER FAMILY REVOCABLE TRUST, by deed dated December 15, 2006 of record in Deed Instrument/Case No. 20070108-0003059, in the County Clerk's Office.

Being the same property conveyed to Ann B. Packer and Steven J. Packer, wife and husband, by deed dated 2-7-11 of record in Deed Instrument/Case No. 20110207-0010511, in the County Clerk's Office.

Commonly known as: 2600 Hillsboro Pike Apartment 204, Bellevue, TN 37212

Said property is conveyed subject to such limitations, restrictions and encumbrances as may affect the property.

Address New Owner(s): 5 Huckleberry Cr, Monterey, CA 93940

Name and Address for persons responsible for taxes: STEVEN J. PACKER, TRUSTEE OF THE PACKER FAMILY REVOCABLE TRUST, dated June 16, 1988,
5 Huckleberry Cr, Monterey, CA 93940

IN WITNESS WHEREOF, the Grantor has caused this instrument to be executed on this 25 day of January, 2010.

Ann B. Packer

Ann B. Packer

Steven J. Packer

Steven J. Packer

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, _____, a Notary Public in and for said state and county Ann B. Packer and Steven J. Packer, with whom I ~~am personally acquainted~~ See CA acknowledgment, and who acknowledged that they executed the within instrument for the purposes therein contained

WITNESS my hand and seal at office this _____ day of _____, 2010.

_____

NOTARY PUBLIC

My Commission Expires: _____

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Monterey

On 1/25/2011 before me, Debra J Kelley Notary Public,
(Here insert name and title of the officer)

personally appeared Ann B. Packer & Steven J. Packer,

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

DEBRA J. KELLEY
COMM. # 1891300
NOTARY PUBLIC-CALIFORNIA
MONTEREY COUNTY
MY COMM. EXP. JUNE 25, 2014

WITNESS my hand and official seal.

Signature of Notary Public

(Notary Seal)

Debra J. Kelley

ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Quitclaim Deed
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages ____ Document Date ____

None
(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)
- ☐ Corporate Officer

(Title)

- ☐ Partner(s)
- ☐ Attorney-in-Fact
- ☐ Trustee(s)
- ☐ Other ____

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he~~/she/~~they,~~ is /~~are~~) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
  - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
  - ❖ Indicate title or type of attached document, number of pages and date.
  - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

STATE OF TENNESSEE

COUNTY OF DAVIDSON

The actual consideration for this transfer is $ 10.00.

Ann B. Packer

Ann B. Packer, AFFIANT

Steven J. Packer

Steven J. Packer, AFFIANT

Subscribed and sworn to before me, this _____ day of _____, 2010.

See CA Sheet for signature.

NOTARY PUBLIC

My Commission Expires: _____

Jurat

State of California

County of Monterey

Subscribed and sworn to (or affirmed) before me on this 25 day of Jan,

20 11 by Ann B. Packer & Steven J. Packer,

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature (Notary seal)

Debra J. Kelley

DEBRA J. KELLEY
COMM. # 1891300
NOTARY PUBLIC - CALIFORNIA
MONTEREY COUNTY
MY COMM. EXP. JUNE 25, 2014

OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Affidavit of Consideration
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages ____ Document Date ____

(Additional information)

INSTRUCTIONS FOR COMPLETING THIS FORM

The wording of all Jurats completed in California after January 1, 2008 must be in the form as set forth within this Jurat. There are no exceptions. If a Jurat to be completed does not follow this form, the notary must correct the verbiage by using a jurat stamp containing the correct wording or attaching a separate jurat form such as this one which does contain proper wording. In addition, the notary must require an oath or affirmation from the document signer regarding the truthfulness of the contents of the document. The document must be signed AFTER the oath or affirmation. If the document was previously signed, it must be re-signed in front of the notary public during the jurat process.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the jurat process is completed.
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Signature of the notary public must match the signature on file with the office of the county clerk.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different jurat form.
  - ❖ Additional information is not required but could help to ensure this jurat is not misused or attached to a different document.
  - ❖ Indicate title or type of attached document, number of pages and date.
- Securely attach this document to the signed document

Prepared by:
Title Source
1450 Long Lake Rd. Suite 400
Troy, MI 48098

Exhibit A -

CERTIFICATION OF TRUST

I/We **STEVEN J. PACKER**, Trustee(s), hereby confirm and attest to the following facts and circumstances relative to the below mentioned trust:

1. Name of trust: **The Packer Family Revocable Trust** is currently in existence and was created on **June 16, 1988**

2. The trust was established by: **STEVEN J. PACKER**

3. The current trustee(s) of the trust is/are: **STEVEN J. PACKER**

4. The power(s) granted to the trustee(s) include:
   - The power to sell, convey and exchange the real property which is the subject of this transaction. **x Yes** ___No
   - The power to borrow money as well as mortgage and encumber the subject property with a deed of trust. **x Yes** ___No.

5. The trust is **Revocable** and is revocable by the following party(ies):
   STEVEN J. PACKER

6. Describe which trustees or combination thereof which are authorized to exercise the powers mentioned in paragraph 4. if the trust has multiple trustees and less than all the trustees are going to execute the documents necessary to complete this transaction:
   STEVEN J. PACKER

7. The trust identification number is as follows (Last Four Digits of SS#, etc.) **7187**

8. Title to trust assets shall be taken in the following fashion: **Quitclaim Deed**

The undersigned trustee(s) hereby declare(s) under penalty of perjury that the trust described above has not been revoked, modified, or amended in any manner which would cause the representations contained herein to be incorrect. This certification is signed by all of the currently acting trustees who declare the above to be true and correct.

_____ _____
STEVEN J. PACKER

Date: 1/25/2011 Date: _____

STATE OF)
) ss.
COUNTY OF)

See CA acknowledgment

On _____, before me personally appeared **STEVEN J. PACKER**, ~~to be known~~ to be the person(s) described in and who executed the foregoing instrument and acknowledged that he/she/they executed the same as his/her/their free act and deed.

_____
Notary Signature

County,
My commission expires

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Monterey

On 1/25/2011 before me, Debra J. Kelley, Notary Public
(Here insert name and title of the officer),

personally appeared Steven J. Packer,

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

DEBRA J. KELLEY
COMM. # 1891300
NOTARY PUBLIC - CALIFORNIA
MONTEREY COUNTY
MY COMM. EXP. JUNE 25, 2014

WITNESS my hand and official seal.

Signature of Notary Public — Debra J. Kelley

(Notary Seal)

ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Certification of Trust
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages 1 Document Date

None
(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)
- ☐ Corporate Officer

(Title)

- ☐ Partner(s)
- ☐ Attorney-in-Fact
- ☐ Trustee(s)
- ☐ Other _

U01805241

2008 Version CAPA v 1632 1/31/2011 76953167/3

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- Securely attach this document to the signed document