BILL GARRETT, Davidson County
Trans:T20120039200 DEEDQC
Recvd: 05/29/12 15:52 5 pgs
Fees:27.00 Taxes:0.00
20120529-0046365

Commitment Number: 12246689

After Recording, Return To: Boston National Title LLC
129 W Trade Street., 9th Floor
Charlotte NC, 28202

This instrument prepared by:
Jay A. Rosenberg, Esq., Rosenberg LPA, Attorneys At Law, 7367A E. Kemper Road, Cincinnati, Ohio 45249 (513) 247-9605 Fax: (866) 611-0170 and Thomas Granville McCroskey, Esq., Tennessee Bar Number: 015569.

New Property Owner/Mail Tax Statements To:
Richard C. Maddux, Jr. , 1422 Bell Trace Drive, Antioch, TN 37013

PROPERTY APPRAISAL (TAX/APN) PARCEL IDENTIFICATION NUMBER
16216008200

MAY 16, 2012

QUITCLAIM DEED

This is a quitclaim deed given for no monetary consideration and pursuant to Tennessee Code Section 67-4-409(a)(4) no transfer tax is due.

Richard C. Maddux, Jr. the surviving joint tenant , hereinafter grantors, of **Davidson County, Tennessee**, without consideration paid, grant and quitclaim to **Richard C. Maddux, Jr.**, as sole and seperate property, hereinafter grantee, whose tax mailing address is **1422 Bell Trace Drive, Antioch, TN 37013**, with quitclaim covenants, all right, title, interest and claim to the following land in the following real property:

That certain tract or parcel of land in DAVIDSON COUNTY, STATE OF TENNESSEE, described as follows, to wit: Land in Davidson County, Tennessee, being Lot No. 59-B on the Plan of Hickory Park Villas, Section 2, amending Plat 5200, page 603 Zone Lot Division, Lots 49 through 56 and 58 through 66 as of record in Book 6250, page 615, Register's Office for Davidson County, Tennessee, to which plan reference is hereby made for a more complete description. Tax ID# 16216008200

Being that parcel of land conveyed to Richard C. Maddox, Jr. Unmarried, Patrick Charles Quelette Unmarried, Tenants in Common with Right of Survivorship from Stanley Dorminey, a married man by that Deed Dated 1/26/2007 and recorded 1/30/2007 in Deed Book 20070130, at Page 0012415 of the Davidson County, TN public registry. This Deed has been rerecorded to correct spelling of Buyer's Name in Deed recorded 02/14/2007 Deed Book 20070214, at page 0018746
Property Address is: 1422 Bell Trace Drive, Antioch, TN 37013

The death certificate of the deceased joint tenant, Patrick Charles Quelette, is attached as an exhibit.

The real property described above is conveyed subject to and with the benefit of: All easements, covenants, conditions and restrictions of record; in so far as in force applicable.

The real property described above is conveyed subject to the following: All easements, covenants, conditions and restrictions of record; All legal highways; Zoning, building and other laws, ordinances and regulations; Real estate taxes and assessments not yet due and payable; Rights of tenants in possession.

TO HAVE AND TO HOLD the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title interest, lien equity and claim whatsoever of the said grantors, either in law or equity, to the only proper use, benefit and behalf of the grantee forever.

Prior instrument reference: **Official Records Book 20070130, Page 0012415**

Executed by the undersigned on May 16, 2012:

Richard C. Maddux, Jr.

STATE OF Tennessee
COUNTY OF Davidson

The foregoing instrument was acknowledged before me on 5/16/, 2012 by **Richard C. Maddux, Jr.** and ~~**Patrick Charles Quelette,**~~ who are personally known to me or have produced DL as identification, and furthermore, the aforementioned persons have acknowledged that their signatures were their free and voluntary act for the purposes set forth in this instrument.

Notary Public
Kevin M. Brady

KEVIN M. BRADY
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

Maximum principal indebtedness for Tennessee recording tax purposes is 0.00.
(On amendments or modifications, enter ONLY the amount of INCREASE, if any.)

State of Tennessee
County of Davidson

I/we hereby swear or affirm that the actual consideration for this transfer or the value of the property transferred, whichever is greater, is $0.00, which amount is equal to or greater than that which the property would command at a fair and voluntary sale.

Subscribed and sworn to before me

This 16th day of May, 2012.

Affiant

Richard C. Maddux, Jr.
Print Name

(Seal)

KEVIN M. BRADY
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

Notary Public

My commission expires:

1/6/2015

Kevin M. Brady
Print Name

Grantee's Name and Address:

Richard C. Maddux, Jr.
1422 Bell Trace Drive, Antioch, TN 37013
Send tax statement to grantee

STATE OF TENNESSEE
Office of Vital Records

0806930

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): Patrick Charles Quelette
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): November 29,2008
4. SOCIAL SECURITY NUMBER: [redacted]7051
5a. AGE-LAST BIRTHDAY (Years): 59
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Min.
6. DATE OF BIRTH (Month, Day, Year): June 12,1949
7. BIRTHPLACE (City and State or Foreign Country): Columbus, Ohio
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 [X] No
9a. PLACE OF DEATH (Check only one): 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): Southern Hills Medical Center
9c. CITY, TOWN, OR LOCATION OF DEATH: Nashville
9d. 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.): Merchandiser
12b. KIND OF BUSINESS/INDUSTRY: Wholesale Drugs
13a. RESIDENCE-STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Antioch
13d. STREET AND NUMBER OR RURAL LOCATION: 1422 Bell Trace Drive
CENSUS TRACT:
13e. INSIDE CITY LIMITS? [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.) Yes 0 [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+):
17. FATHER'S NAME (First, Middle, Last): Eugene Clifford Quelette
18. MOTHER'S NAME (First, Middle, Maiden Surname): Helen Ruth Cassidy

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Richard Maddux
19b. RELATIONSHIP TO DECEASED: Executor
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 1422 Bell Trace Dr.,Antioch,Tn. 37013

DISPOSITION

20a. METHOD OF DISPOSITION: 1 Burial 2 [X] 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, Tennessee

FUNERAL DIRECTOR

21a. SIGNATURE OF FUNERAL DIRECTOR: Jeff Murphy
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 3862
21c. SIGNATURE OF EMBALMER:
21d. LICENSE NUMBER OF EMBALMER:
22a. NAME AND ADDRESS OF FUNERAL HOME: Music City Mortuary, 2409 Kline Avenue, Nashville, Tennessee 37211
22b. LICENSE NUMBER OF FUNERAL HOME: 1105

REGISTRAR

23. REGISTRAR'S SIGNATURE: Linda R. Bowers, RR
24. DATE FILED (Month, Day, Year): December 03, 2008

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 SIGNATURE AND TITLE OF PHYSICIAN: Edward White MD
25b. LICENSE NUMBER: MD38142
25c. DATE SIGNED (Month, Day, Year): 12/2/08
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):
27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print):

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIFICATION WITHIN 48 HOURS.

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.

IMMEDIATE CAUSE (Final disease or condition resulting in death): a. Acute Respiraty Failure — DUE TO (OR AS A CONSEQUENCE OF):
Sequentially list conditions, if any, resulting in immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST:
b. Pneumonia — DUE TO (OR AS A CONSEQUENCE OF):
c. Gastrointestinal Bleed — DUE TO (OR AS A CONSEQUENCE OF):
d. Cirrhosis

Approximate Interval Between Onset and Death: 12 hrs

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):

PH-1859 (REV. 6/99) — SR01-NO — RDA 1999

2746601

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 Registra
Davidson County, Tennessee

DEC 03 2008
Date Issued

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

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD