BILL GARRETT, Davidson County
Trans:T20150036664 DEEDQC
Recvd: 05/12/15 12:48 12 pgs
Fees:62.00 Taxes:0.00
20150512-0043440

This instrument was prepared by:
Fiorela Orezzoli
Cole Law Group PC
750 Old Hickory Boulevard
Building Two, Suite 202
Brentwood, TN 37027

QUITCLAIM DEED

FROM: Kevin Mikle Watts, Grantor

TO: Mikle Clinton Watts and Billinda Jean Watts, Grantees

Address New Owner(s) as Follows:	Send Tax Bills to:	Map-Parcel Numbers
Mikle C.Watts and Billinda J. Watts 15950 East Highway 94 Rogers, AR 72758	Mikle C. Watts and Billinda J. Watts 15950 East Highway 94 Rogers, AR 72758	161-15-0-A- 028.00 CO

STATE OF TN)
)
COUNTY OF Wilson)

The actual consideration for this transfer is ZERO AND NO/100 DOLLARS ($0.00).

MIKLE CLINTON WATTS

SUBSCRIBED AND SWORN TO before me, this the 7 day of May, 2015.

TODD G COLE
STATE OF TENNESSEE NOTARY PUBLIC
WILSON COUNTY

Notary Public
My Commission Expires: 04/03/17

FOR AND IN CONSIDERATION OF Ten and no/100 dollars ($10.00) and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Kevin Mikle Watts, deceased, a resident of Nashville, Davidson County, State of Tennessee ("Grantor"), does quitclaim unto Mikle Clinton Watts and Billinda Jean Watts, a married couple residing in Rogers, Benton County, State of Arkansas ("Grantee"), its successors and assigns, all

of Grantor's rights, title and interest in and to a certain tract or parcel of land in Nashville, Davidson County, State of Tennessee, more particularly described on Exhibit A attached hereto and incorporated herein by this reference (the "Land"), together with all buildings, structures and other improvements of any and every nature located on the Land and all fixtures attached or affixed to the Land or to any such buildings, structures or other improvements (collectively with the Land, the "Property").

The Property is improved property known as 521 Swiss Avenue, Nashville, TN 37211.

Kevin Mikle Watts (the "Decedent"), a resident of Nashville, Davidson County, Tennessee, died intestate on April 11, 2015. On April 23, 2015, the Estate of Kevin Mikle Watts was opened as an intestate estate in the Probate Court of Davidson County, Tennessee. The Davidson County Probate Court appointed Mikle Clinton Watts as Administrator of the Estate of Kevin Mikle Watts and issued Letters of Administration to Mikle Clinton Watts as Administrator.

At the time of his death, the Decedent was not married and did not have children. Pursuant to T.C.A. § 31-2-104(b) (2), if there is no surviving spouse and no surviving issue, then the entire intestate estate passes to the decedent's parents, equally. Pursuant to T.C.A. § 31-2-103, the real property of an intestate decedent shall vest immediately upon death of the decedent in the heirs as provided in T.C.A. § 31-2-104. At the time of his death, the Decedent was survived by his father, Mikle Clinton Watts, and his mother, Billinda Jean Watts. Pursuant to T.C.A. § 31-2-103 and T.C.A. § 31-2-104, the Decedent's interest in the Property passed to his parents, Mikle Clinton Watts and Billinda Jean Watts, at the time of his death.

A copy of the Certificate of Death of Kevin Mikle Watts is attached hereto as Exhibit B. A copy of the Order to Open Intestate Estate, Appoint Personal Representative without Bond, and Issue Letters of Administration for the Estate of Kevin Mikle Watts is attached hereto as

Exhibit C. A copy of the Letters of Administration is attached hereto as Exhibit D. The foregoing is offered solely for informational purposes concerning Grantor's and Grantees' rights, title, and interest in and to the Property.

The Property is conveyed subject to such limitations, restrictions and encumbrances as may affect the Property.

Witness my hand this 7 day of May, 2015.

GRANTOR:

Kevin Mikle Watts

By: _____
MIKLE CLINTON WATTS,
Administrator of the Estate of Kevin M. Watts

STATE OF TN)
)
COUNTY OF Wilson)

Before me, Todd G. Cole, a Notary Public of said County and State, personally appeared Mikle Clinton Watts, Administrator of the Estate of Kevin Mikle Watts, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged himself to be Administrator of the Estate of Kevin Mikle Watts, the within named bargainor, and that he as such Administrator executed the foregoing instrument for the purposes therein contained, by personally signing the name of the Estate of Kevin Mikle Watts by himself as Administrator.

Witness my hand and seal, at Office in Brentwood, TN this 7th day of May, 2015.

TODD G. COLE
STATE OF TENNESSEE NOTARY PUBLIC
WILSON COUNTY

_____
Notary Public
My Commission Expires: 04/03/17

EXHIBIT A

PROPERTY DESCRIPTION

Land in Davidson County, Tennessee, being Unit No. 28 on the Plan of RoseMonte, Phase 1, of record in the Master Deed of RoseMonte recorded in Instrument No. 20051117-0138877, Register's Office for said County, to which reference is made for a more complete description.

Being part of the same property conveyed to Kevin Mikle Watts by deed of record in Instrument No. 20060712-0083452, Register's Office for Davidson County, Tennessee.

This conveyance is subject to any and all existing plat notes, conditions, restrictions, and easements of record.

EXHIBIT B

CERTIFICATE OF DEATH

[see attached]

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH
STATE FILE NUMBER

DECEDENT

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix): KEVIN MIKLE WATTS
2. SEX: MALE
3. DATE OF DEATH (Month, Day, Year): April 11, 2015
4. TIME OF DEATH (Approx.): 2:05 PM
5a. AGE-Last Birthday (Years): 32
5b. Under 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): AUGUST 3, 1982
7. BIRTHPLACE (City and State or Foreign Country): FORT SMITH, AR

TYPE/PRINT IN PERMANENT BLACK INK

8a. PLACE OF DEATH (Check only one)
IF DEATH OCCURRED IN A HOSPITAL: ☐ Inpatient ☐ ER/Outpatient ☐ DOA
IF DEATH OCCURRED SOMEWHERE OTHER THAN A HOSPITAL: ☐ Hospice facility ☐ Nursing home/Long term care facility ☒ Decedent's home ☐ Other residence ☐ Other (Specify)
8b. FACILITY NAME (If not institution, give street and number): 766 Elysian Fields Road
8c. CITY OR TOWN: Nashville
8d. COUNTY OF DEATH: Davidson

NAME OF DECEDENT (To be completed by Physician or Institution)

9. MARITAL STATUS: ☐ Married ☐ Married, but separated ☐ Widowed ☐ Divorced ☒ Never married ☐ Unknown
10. SURVIVING SPOUSE (If wife, give name prior to first marriage)
11a. DECEDENT'S USUAL OCCUPATION: INFO TECHNOLOGY
11b. KIND OF BUSINESS/INDUSTRY: COMPUTER NETWORKING
12a. SOCIAL SECURITY NUMBER: [redacted]9415
12b. RESIDENCE-STATE OR FOREIGN COUNTRY: TENNESSEE
13b. COUNTY: DAVIDSON
13c. CITY OR TOWN: NASHVILLE
12c. STREET AND NUMBER: 521 SWISS AVE
13e. INSIDE CITY LIMITS: ☒ Yes ☐ No
13f. ZIP CODE: 37211
14. WAS DECEDENT EVER IN US ARMED FORCES? ☐ Yes ☒ No

15. DECEDENT'S EDUCATION (Check the box that best describes the highest degree or level of school completed at the time of death)
☐ 8th grade or less
☐ 9th - 12th grade, no diploma
☐ High school graduate or GED completed
☒ Some college credit, but no degree
☐ Associate degree (e.g., AA, AS)
☐ Bachelor's degree (e.g., BA, AB, BS)
☐ Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA)
☐ Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)
☐ Unknown

15. DECEDENT OF HISPANIC ORIGIN? (Check the box that best describes whether the decedent is Spanish/Hispanic/Latino. Check the "No" box if decedent is not Spanish/Hispanic/Latino)
☒ No, not Spanish/Hispanic/Latino
☐ Yes, Mexican, Mexican American, Chicano
☐ Yes, Puerto Rican
☐ Yes, Cuban
☐ Yes, other Spanish/Hispanic/Latino
(Specify) ____
☐ Unknown

17. DECEDENT'S RACE (Check one or more races to indicate what the decedent considered himself or herself to be)
☒ White
☐ Black or African American
☐ American Indian or Alaska Native (Name of the enrolled or principal tribe) ____
☐ Asian Indian
☐ Chinese
☐ Filipino
☐ Japanese
☐ Korean
☐ Vietnamese
☐ Other Asian (Specify) ____
☐ Native Hawaiian
☐ Guamanian or Chamorro
☐ Samoan
☐ Other Pacific Islander (Specify) ____
☐ Other (Specify) ____
☐ Unknown

PARENTS

16. FATHER'S NAME (First, Middle, Last): MIKLE CLINTON WATTS
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): BILUNDA JEAN JOHNDROW

DISPOSITION

20a. INFORMANT'S NAME: MIKLE WATTS
20b. RELATIONSHIP TO DECEDENT: FATHER
20c. MAILING ADDRESS (Street and Number, City, State, Zip Code): 15950 E. HWY 94 ROGERS, AR 72758
21a. METHOD OF DISPOSITION: ☐ Burial ☒ Cremation ☐ Donation ☐ Entombment ☐ Removal from State ☐ Other (Specify) ____
21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place): NASHVILLE FUNERAL AND CREMATION
21c. LOCATION - City or Town and State: NASHVILLE, TN
22a. SIGNATURE OF FUNERAL DIRECTOR: ▶ CHRISTOPHER TAYLOR
22b. LICENSE NUMBER: 4243
22c. SIGNATURE OF EMBALMER: ▶
22d. LICENSE NUMBER
23a. NAME AND ADDRESS OF FUNERAL HOME: NASHVILLE FUNERAL AND CREMATION 210 McMAHUN ST. NASHVILLE, TN 37203
23b. LICENSE NUMBER OF FUNERAL HOME: 1136

REGISTRAR

24. REGISTRAR'S SIGNATURE ▶ [signature]
25. DATE FILED (Month, Day, Year): April 14 2015

CERTIFIER

26. CERTIFIER (Check only one)
26a. ☐ PHYSICIAN - To the best of my knowledge, death occurred at the date and place, and due to the cause(s) and manner stated.
26b. ☒ 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 stated.

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CAUSE OF DEATH MUST COMPLETE AND SIGN WITHIN 48 HOURS.

27a. SIGNATURE OF CERTIFIER ▶ [signature]
27b. LICENSE NUMBER: 34173
27c. DATE SIGNED (Month, Day, Year): April 12, 2015
27d. NAME AND ADDRESS: Feng Li, M.D., J.D., Ph.D.; 850 R.S. Gass Boulevard, Nashville, TN 37216, MEC15-0856

MEDICAL CERTIFICATION

28. PART I. Enter the chain of events (diseases, injuries, or complications) that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. Enter only one cause on a line.

		Approximate Interval: Onset to death
IMMEDIATE CAUSE (Final disease or condition resulting in death) → a. Gunshot wound of head	Due to (or as a consequence of)	
Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the 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? ☒ Yes ☐ No
29b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? ☒ Yes ☐ No

30. MANNER OF DEATH: ☐ Natural ☐ Homicide ☐ Accident ☐ Pending investigation ☒ Suicide ☐ Could not be determined
31. DID TOBACCO USE CONTRIBUTE TO DEATH? ☐ Yes ☐ Probably ☐ No ☒ Unknown
32. IF FEMALE: ☐ Not pregnant within past year ☐ Pregnant at time of death ☐ Not pregnant, but pregnant within 42 days of death ☐ Not pregnant, but pregnant 43 days to 1 year before death ☐ Unknown if pregnant within the past year
33. IF TRANSPORTATION INJURY, SPECIFY: ☐ Driver/Operator ☐ Passenger ☐ Pedestrian ☐ Other (Specify) ____
34a. DATE OF INJURY (Month, Day, Year): Unknown
34b. TIME OF INJURY: UNK
34c. INJURY AT WORK? ☐ Yes ☒ No
34d. PLACE OF INJURY - at home, farm, street, factory, office, building, etc. (Specify): Residence
34e. DESCRIBE HOW INJURY OCCURRED: Shot self
34f. LOCATION OF INJURY (Street and Number, City or Town, State): 766 Elysian Fields Road, Nashville, TN

RDA 1389

PH-1659 (Rev. 9/2011)

7683148

I hereby certify the above to be a true and correct representation of the record or document on file in this department. This certified copy is valid only when printed on security paper showing the red embossed seal of the Tennessee Department of Health. Alteration or erasure voids this certification. Reproduction of this document is prohibited.

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

R. Benton McDonough, JD
STATE REGISTRAR

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

7683148

Date Issued APR 14 2015

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

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD

EXHIBIT C

ORDER TO OPEN INTESTATE ESTATE, APPOINT PERSONAL REPRESENTATIVE WITHOUT BOND, AND ISSUE LETTERS OF ADMINISTRATION

[see attached]

IN THE PROBATE COURT OF DAVIDSON COUNTY, TENNESSEE

FILED

APR 23 2015

RICHARD R. BOOKER, Clerk
By _____ Deputy

IN THE MATTER OF:	)	
	)	
KEVIN MIKLE WATTS,	)	NO. 15P667
	)	
Deceased.	)	

ORDER TO OPEN INTESTATE ESTATE, APPOINT PERSONAL REPRESENTATIVE WITHOUT BOND AND ISSUE LETTERS OF ADMINISTRATION

This cause came to be heard on this the 23rd day of April, 2015, before the Honorable Scott Pilkinton, Probate Master, upon the sworn Petition of Mikle Clinton Watts, which Petition is duly verified, for the appointment of Personal Representative of the Estate of Kevin Mikle Watts; and

It appearing to the Court that Kevin Mikle Watts, a resident citizen of Nashville, Davidson County, Tennessee, departed this life intestate on the 11th day of April, 2015, at the age of thirty-two (32) years, leaving an estate which requires administration;

It further appearing to the Court that due search and inquiry have been made to ascertain whether the Decedent left a Last Will and Testament, but no Will has been found; therefore, it is the belief of the Petitioner that the Decedent died intestate;

It also appearing to the satisfaction of the Court that the character and value of the property of the Decedent for probate purposes has a total approximate fair market value equal to an amount less than the sum of One Million dollars ($1,000,000);

It further appearing to the Court that, at the time of his death, the Decedent was not married and did not have children. The Petitioner advises and believes and, therefore, alleges

that the only next-of-kin are the Decedent's parents, Mikle Clinton Watts and Billinda Jean Watts, and one brother, Joseph Clinton Watts. The Petitioner advises and believes, and therefore, alleges that the only heirs-at-law are the Decedent's parents, Mikle Clinton Watts and Billinda Jean Watts. Therefore, pursuant to *Tennessee Code Annotated* §31-2-104(b)(2), the Decedent's parents, Mikle Clinton Watts and Billinda Jean Watts, are the next-of-kin and sole beneficiaries of the Decedent's estate;

It also appearing to the Court that pursuant to *Tennessee Code Annotated* § 30-1-106, that the Decedent's father, Mikle Clinton Watts, is given preference in the granting of administration to serve as Personal Representative of the Estate of Kevin Mikle Watts. The Decedent's mother, Billinda Jean Watts, has consented to the appointment of Mikle Clinton Watts as Personal Representative of the Estate of Kevin Mikle Watts without the necessity of bond and further waived the requirement of the personal representative of filing an Inventory and Annual Accounting in this estate, except that an estate status report shall be filed annually or as required by the Court; and

It further appearing to the Court that Mikle Clinton Watts is a fit and proper person to serve as Personal Representative of the Estate of Kevin Mikle Watts.

IT IS, THEREFORE, BY THE COURT, ORDERED, ADJUDGED AND DECREED

That Mikle Clinton Watts be appointed as Personal Representative of the Estate of Kevin Mikle Watts, deceased; and

That the Petitioner, Mikle Clinton Watts, be issued Letters of Administration, without necessity of posting bond, and he, as such Personal Representative in this Estate, hereby is expressly excused from making and filing any inventory or Court accounting of this probate estate, in accordance with the terms of the said consent and waiver heretofore filed in this

probate administration by all of the intestate heirs, except that said Personal Representative shall annually file with the Clerk of this Court an Estate Status Report during the period of this estate administration.

ENTER this the 23rd day of April, 2015.

SCOTT PILKINTON
Probate Master

April 23, 2015
DATE

APPROVED FOR ENTRY:

TODD COLE (#31078)
FIORELA OREZZOLI (#032288)
Attorneys for Petitioner
Cole Law Group, PC
750 Old Hickory Boulevard
Building Two, Suite 202
Brentwood, Tennessee 37027
(615) 490-6020

EXHIBIT D

LETTERS OF ADMINISTRATION

[see attached]

IN THE CIRCUIT COURT OF DAVIDSON COUNTY, TENNESSEE

(PROBATE DIVISION)

LETTERS OF ADMINISTRATION

TO: **MIKLE CLINTON WATTS** DOCKET NO: **15P667**

*It appearing to the Court that **KEVIN MIKLE WATTS** has died leaving no Will, and the Court being satisfied as to your claim to said Administration, you have given Bond pursuant to Order, if required, qualified as directed by law, and the Court having ordered that Letters of Administration be issued to you;*

*THESE ARE, THEREFORE, to authorize and empower you, the said **MIKLE CLINTON WATTS,** to take into your possession and control all the goods, chattels, claims, and papers of the said estate, and to return a true and perfect inventory thereof to this Court; to collect and pay all debts, and to do and transact all the duties in relation to said estate, and to deliver the residue thereof to those who are by law entitled.*

*WITNESS, Richard R. Rooker, Clerk of the Probate Court, at office, this **April 23rd, 2015** .*

RICHARD R. ROOKER, Clerk

RICHARD R. ROOKER CIRCUIT COURT CLERK

D.C.

STATE OF TENNESSEE)

DAVIDSON COUNTY)

I, RICHARD R. ROOKER, Clerk of the Probate Court, do hereby certify that the foregoing is a full, true and perfect copy of the Letters of Administration issued to **MIKLE CLINTON WATTS** as **Administrator** of the estate of **KEVIN MIKLE WATTS**, deceased, and I do further certify that **MIKLE CLINTON WATTS** is still acting as Administrator of the estate, and all acts as such are entitled to full faith and credit, as it appears from the official record in my office in Nashville, Tennessee, this the 23 day of April, 2015

RICHARD R. ROOKER, Clerk

RICHARD R. ROOKER CIRCUIT COURT CLERK

D.C.