THIS INSTRUMENT WAS PREPARED AT THE REQUEST OF GRANTOR WITHOUT THE BENEFIT OF TITLE SEARCH OR SURVEY BY:

LARRY B. HOOVER
ATTORNEY AT LAW
1222 16th Avenue South, Suite 12
NASHVILLE, TENNESSEE 37212

BILL GARRETT, Davidson County
Trans:T20160061373 DEEDQC
Recvd: 07/18/16 11:28 7 pgs
Fees:37.00 Taxes:0.00
20160718-0073460

ADDRESS NEW OWNERS:
1) Michael L. Shields, Sr.
2) Eddie Shields
3) Westport Development Co and Associates, C/O Michael Shields, Sr.
3763 Westport Drive
Nashville, TN 37218

MAP-PARCEL: 048-00-0-215.00

4) Shawn Valtrese Jenkins
176 Queens Lane
Nashville, TN 37218

SENT TAX BILLS:
Michael Shields, Sr.
3763 Westport Drive
Nashville, TN 37218

QUITCLAIM DEED

This improved property known as 3763 Westport Drive, Nashville, Davidson County, Tennessee was held by Katharine Shields and Westport Development Co. & Associates, Inc., by way of quitclaimed deed recorded on February 11, 2014 in the Davidson County Register of Deeds, bearing the recording number of 20140211-0011995. Katharine Shields died on January 16, 2015, in Davidson County Tennessee, as evidenced by the death certificate attached as Exhibit A. Katharine Shields died leaving no will but having the following heirs at law: her husband Eddie Shields, her son Michael Shields, Sr., and daughter Shawn Valtrese Jenkins. A court order opening the Estate of Katharine Shields was signed on April 21, 2016, in Davidson County Tennessee, naming Michael Shields, Sr., as the Administrator of the estate. A copy of said order is attached as exhibit B.

FOR AND IN CONSIDERATION of the sole purpose of clearing title I, Michael Shields, Sr., administrator of the Estate of Katherine Shields, do hereby transfer, quitclaim and convey, unto Eddie Shields, Michael Shields, Sr., and Shawn Valtrese Jenkins all of Katherine Shield's right, title and interest in and to the following described tract or parcel of land, lying the County of Davidson State of Tennessee;

Situated in the 1st and 2nd Civil Districts and being described as follows, to-wit:

Being tract no. 1, Westport Manor, of record in Book 5200, page 341, Resister's Office for Davidson County, Tennessee, reference to which is hereby made for a more complete description of said lot.

Being the same property conveyed to Katharine Shields and Westport Development Company & Associates, Inc., by Quitclaim Deed from Eddie Shields and Katharine Shields under the recording number of 20140211-0011995 in the Davidson County Register of Deeds.

Also being the same property conveyed to Katharine Shields and Eddie Shields by quitclaim deed from Michael L. Shields, Sr., of record in Book 8332, page 603, in the Davidson County Register of Deeds.

Also being the same property conveyed to Michael L. Shields, Sr., by quitclaim deed from Katharine Shields and Eddie Shields of record in Book 8323, page 309 in the Davidson County Register of Deeds.

Subject to any easements and/or restrictions of record in the register's office for Davidson County, Tennessee.

Improved property known as 3763 Westport Drive, Nashville, Tennessee 37218

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

There are no debts or encumbrances which might become a lien on this described real estate.

IN WITNESS WHEREOF, I have hereunto set my hand this the 15th day of July, 2016.

Michael Shields, Sr.

Michael Shields, Sr.,
Administrator of the Estate of Katharine Shields.

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me, Katrina L. Lee Notary Public, the within named Michael Shields, Sr., the bargainer with whom I am personally acquainted or proved to me on the basis of satisfactory evidence, and who acknowledged that he executed the within instrument for the purposes therein contained.

SWORN and SUBSCRIBED to before me on this the 15th day of July, 2016.

Katrina L. Lee
NOTARY PUBLIC
MY COMMISSION EXPIRES: July 2, 2018

KATRINA L LEE
STATE OF TENNESSEE NOTARY PUBLIC
COUNTY OF DAVIDSON

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

The actual consideration or value, whichever is greater, for this transfer is Zero Dollars ($0).

AFFIANT

SWORN and SUBSCRIBED to before me on this the 15th day of July, 2016.

NOTARY PUBLIC
MY COMMISSION EXPIRES: July 2, 2018

KATRINA L LEE
STATE OF TENNESSEE NOTARY PUBLIC
COUNTY OF DAVIDSON

STATE OF TENNESSEE
Office of Vital Records

15-097

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH
STATE FILE NUMBER

DECEDENT

1. DECEDENT'S LEGAL NAME (First, Middle, Last, Suffix): Katharine Henry Shields
2. SEX: Female
3. DATE OF DEATH (Month, Day, Year): January 16, 2015
4. TIME OF DEATH (Approx.):
5a. AGE-Last Birthday (Years): 86
5b. UNDER 1 YEAR: Months / Days
5c. UNDER 1 DAY: Hours / Minutes
6. DATE OF BIRTH (Month, Day, Year): October 28, 1928
7. BIRTHPLACE (City and State or Foreign Country): Nashville, Tennessee

TYPE/PRINT IN PERMANENT BLACK INK

8a. PLACE OF DEATH (Check only one)
IF DEATH OCCURRED IN A HOSPITAL: [X] 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): Metro General Hospital
8c. CITY OR TOWN: Nashville
8d. COUNTY OF DEATH: Davidson

NAME OF DECEDENT. (For use by Physician or Institution)

9. MARITAL STATUS: [X] Married [ ] Married, but separated [ ] Widowed [ ] Divorced [ ] Never married [ ] Unknown
10. SURVIVING SPOUSE (If wife, give name prior to first marriage): Eddie Shields
11a. DECEDENT'S USUAL OCCUPATION: Child Care Provider
11b. KIND OF BUSINESS/INDUSTRY: Day Care
12. SOCIAL SECURITY NUMBER: [redacted]0520
13a. RESIDENCE-STATE OR FOREIGN COUNTRY: Tennessee
13b. COUNTY: Davidson
13c. CITY OR TOWN: Nashville
13d. STREET AND NUMBER: 4304 Drakewood Lane
13e. INSIDE CITY LIMITS: [X] Yes [ ] No
13f. ZIP CODE: 37218
14. WAS DECEDENT EVER IN US ARMED FORCES?: [ ] Yes [X] 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
[X] Some college credit, but no degree
[ ] Associate degree (e.g., AA, AS)
[X] 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

16. 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)
[X] No, not Spanish/Hispanic/Latino
[ ] Yes, Mexican, Mexican American, Chicano
[X] 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)
[X] White
[X] Black or African American
[ ] American Indian or Alaska Native (Name of the enrolled or principal tribe)
[ ] Asian Indian
[ ] Chinese
[X] Filipino
[ ] Japanese
[X] Korean
[ ] Vietnamese
[ ] Other Asian (Specify)
[ ] Native Hawaiian
[ ] Guamanian or Chamorro
[ ] Samoan
[ ] Other Pacific Islander (Specify)
[ ] Other (Specify)
[ ] Unknown

PARENTS

18. FATHER'S NAME (First, Middle, Last): Willie Henry
19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last): Menervia Smith

20a. INFORMANT'S NAME: Eddie Shields
20b. RELATIONSHIP TO DECEDENT: Husband
20c. MAILING ADDRESS (Street and Number, City, State, Zip Code): 4304 Drakewood Ln., Nashville, TN. 37218

DISPOSITION

21a. METHOD OF DISPOSITION: [ ] Donation [X] Entombment [X] Burial [ ] Cremation [ ] Removal from State [ ] Other (Specify)
21b. PLACE OF DISPOSITION (Name of cemetery, crematory, other place): Middle TN. Veterans Cemetery
21c. LOCATION - City or Town and State: Nashville, Tennessee

22a. SIGNATURE OF FUNERAL DIRECTOR: ▶ Terrell Broady
22b. LICENSE NUMBER: 4009
22c. SIGNATURE OF EMBALMER: ▶ Terrell Broady
22d. LICENSE NUMBER: 4117
23a. NAME AND ADDRESS OF FUNERAL HOME: Terrell Broady Funeral Home, Inc. 3855 Clarksville Pike, Nashville, Tennessee 37218
23b. LICENSE NUMBER OF FUNERAL HOME: 1137

REGISTRAR

24. REGISTRAR'S SIGNATURE: ▶ Tara Bruce Kelly for DR
25. DATE FILED (Month, Day, Year): Feb 6, 2015

CERTIFIER

26. CERTIFIER (Check only one):
26a. [X] 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: 037735
27c. DATE SIGNED (Month, Day, Year): 1/26/15
27d. NAME AND ADDRESS: 1818 Alabama St Nashville TN 37204

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.	CVA	10 days
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.
Alzheimer's Unknown, 1°, ESRD

29a. WAS AN AUTOPSY PERFORMED? [X] Yes [ ] No
29b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? [ ] Yes [X] No

30. MANNER OF DEATH: [X] Natural [ ] Homicide [ ] Accident [ ] Pending Investigation [ ] Suicide [ ] Could not be determined
31. DID TOBACCO USE CONTRIBUTE TO DEATH? [ ] Yes [ ] Probably [ ] No [X] Unknown
32. IF FEMALE: [X] 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)
34b. TIME OF INJURY
34c. INJURY AT WORK? [ ] Yes [ ] No
34d. PLACE OF INJURY – at home, farm, street, factory, office, building, etc. (Specify)
34e. DESCRIBE HOW INJURY OCCURRED
34f. LOCATION OF INJURY: (Street and Number, City or Town, State)

PH-1659 (Rev. 10/2011) RDA 1399

7692743

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

7692743
Date Issued FEB 06 2015

CERTIFICATION OF VITAL RECORD

Copy

IN THE PROBATE COURT FOR DAVIDSON COUNTY, TENNESSEE

FILED

APR 21 2016

RICHARD R. ROOKER, Clerk

By: _____ Deputy

IN THE ESTATE OF:

KATHARINE HENRY SHIELDS
Decedent.

NO. 16P-615

ORDER

This cause came to be heard upon a petition to open an intestate estate on behalf of Katharine Henry Shields, who died intestate on January 16, 2015. After hearing from nominated Administrator Michael Shields, Sr., and a review of the file, the Court is of the opinion he should serve as Administrator of the above estate. The Court further finds that no bond be set.

It is therefore ORDERED, ADJUDGED, and DECREED that Michael Shields, Sr., should serve as Administrator of the estate of Katharine Henry Shields, that no bond be set, and that Letters of Administration should issue. Attorney is waived RK

ENTER this the 21st day of April, 2016.

Randall Kennedy, Judge

APPROVED FOR ENTRY:

LARRY B. HOOVER, #15475
Attorney for Petitioner
1222 16th Avenue South
Suite 12
Nashville, TN 37212
615-690-3125

Copy

CERTIFICATE OF SERVICE

I do hereby certify that a true and exact copy of the foregoing petition has been mailed, postage pre-paid, to the following parties on this the ~~22~~ 21st day of April, 2016:

Michael Shields, Sr.
3763 Westport Drive
Nashville, TN 37218

Eddie L. Shields
3763 Westport Drive
Nashville, TN 37218

Shawn V. Jenkins
176 Queens Lane
Nashville, TN 37218

Larry B. Hoover