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

ADDRESS NEW OWNER:
Emma E. Miller Probate Trust
C/O Angela Miller Bond, Trustee
1013 Mansfield Street
Nashville, TN 37206

MORTGAGE: None

MAP-PARCEL: 083 05 0 166.00

SENT TAX BILLS:
Same as above

BILL GARRETT, Davidson County
Trans:T20160097031 DEEDQC
Recvd: 11/02/16 13:37 19 pgs
Fees:97.00 Taxes:0.00
20161102-0115968

QUITCLAIM DEED

This improved property known as 1013 Mansfield Street, Nashville, Davidson County Tennessee 37206 was held by Odell Miller and wife, Emma E. Miller, a married couple, by virtue of a deed found in Book 5390, Page 937, Davidson County Register of Deeds Office. As evidenced by the attached copy of his death certificate, Odell Miller died on January 4, 1991, leaving no will. (Exhibit A) As evidenced by the attached copy of her death certificate, Emma E. Miller died on September 15, 2005. (Exhibit B) As evidenced by the attached Last Will and Testament, Emma E. Miller died leaving a Last Will and Testament directing that the above property be placed into a trust for two of her children, namely, Richard Rual Miller and Michael Mansfield Miller. (Exhibit C) As evidenced by the attached Court Order from the Probate Court for Davidson County Tennessee, the Estate of Emma E. Miller was opened in the Davidson County Tennessee Probate Court on October 12, 2005, naming Angela Miller (now known as Angela Miller Bond) as the personal representative of the estate. (Exhibit D)

FOR AND IN CONSIDERATION of the sole purpose of clearing title I, Angela Miller Bond, Personal Representative of the Estate of Emma E. Miller, do hereby transfer, quitclaim and convey, unto the Emma E. Miller Probate Trust, all of Emma E. Miller's right, title and interest in and to the following described tract or parcel of land, lying the County of Davidson, State of Tennessee;

BEING Lot No. 15 on the Map of House & Simonton's Subdivision of Lots Nos. 1 to 16, inclusive in Stratton's & Seymour's Addition to Edgefield, now east Nashville, of record in Book 57, Page 137, Register's Office for Davidson County, Tennessee.

BEING, the same property conveyed to Ronald Patrick Lafferty et ux Jeannie Elaine Lafferty, by deed of record, in Book 5095, Page 718, Register's Office of Davidson County, Tennessee.

Being the same property conveyed to Odell Miller and wife Emma E. Miller by deed of record in Book 5390, Page 937, Register's Office of Davidson County, Tennessee.

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

Improved property known as 1013 Mansfield Street, Nashville, Tennessee 37206

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

IN WITNESS WHEREOF, I have hereunto set my hand this the 2nd day of Nov., 2016.

Angela Miller Bond

Angela Miller Bond, Personal Representative
of the Estate of Emma E. Miller

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me, Judy Dobbins, Notary Public, the within named Angela Miller Bond, 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 2ND day of November, 2016.

Judy Dobbins
NOTARY PUBLIC
MY COMMISSION EXPIRES: Sept. 10, 2018

JUDY ANN DOBBINS
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires SEPT. 10, 2018

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

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

Angela Miller Bond
AFFIANT

SWORN and SUBSCRIBED to before me on this the 2ND day of November, 2016.

Judy Dobbins
NOTARY PUBLIC
MY COMMISSION EXPIRES: Sept. 10, 2018

JUDY ANN DOBBINS
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires SEPT. 10, 2018

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT
CERTIFICATE OF DEATH

9100940 — STATE FILE NUMBER: 91 000242

TYPE/PRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

DECEDENT

1. DECEDENT'S NAME (First, Middle, Last)	ODELL MILLER
2. SEX	M
3. DATE OF DEATH (Month, Day, Year)	JANUARY 4, 1991
SOCIAL SECURITY NUMBER	-4967
4a. AGE – LAST BIRTHDAY (Years)	58
4b. UNDER 1 YEAR – MOS. / DYS.	
4c. UNDER 1 DAY – HOURS / MIN.	
5. DATE OF BIRTH (Month, Day, Year)	12/27/1932
7. BIRTHPLACE (City and State or Foreign Country)	HUNTSVILLE, ALABAMA
8. WAS DECEDENT EVER IN U.S. ARMED FORCES?	2 [X] No
8a. PLACE OF DEATH (Check only one)	HOSPITAL: 3 [X] DOA
9b. FACILITY NAME (If not institution, give street and number)	Edgefield Hospital 082
9c. CITY, TOWN, OR LOCATION OF DEATH	NASHVILLE, TENNESSEE
9d. COUNTY OF DEATH	DAVIDSON
10. MARITAL STATUS—Married, Never Married, Widowed, Divorced (Specify)	MARRIED
11. SURVIVING SPOUSE (If wife, give maiden name)	EMMA EVANS
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired.)	TRUCK DRIVER
12b. KIND OF BUSINESS/INDUSTRY	HESTER BATTERY, INC.
13a. RESIDENCE – STATE	TENNESSEE
13b. COUNTY	DAVIDSON 19
13c. CITY, TOWN OR LOCATION	NASHVILLE, TENNESSEE 094
13d. STREET AND NUMBER OR RURAL LOCATION	1013-MANSFIELD
13e. INSIDE CITY LIMITS?	1 [X] Yes
13f. ZIP CODE	37206
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No—If yes, specify Cuban, Mexican, Puerto Rican, etc.)	No
15. RACE—American Indian, Black, White, etc. (Specify)	BLACK
16. DECEDENT'S EDUCATION (Specify only highest grade completed)	Elementary/Secondary (0-12): 8th; College (1-4 or 5+):

FACT

17. FATHER'S NAME (First, Middle, Last)	LAWYER MILLER
18. MOTHER'S NAME (First, Middle, Maiden Surname)	UNK

INFORMANT

19a. INFORMANT'S NAME (Type/Print)	19b. RELATIONSHIP TO DECEASED	19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code)
EMMA EVANS MILLER	WIFE	1013 - MANSFIELD

DISPOSITION

20a. METHOD OF DISPOSITION	20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place)	20c. LOCATION—City or Town, State	
1 [X] Burial 2 [ ] Cremation 3 [ ] Removal from State 4 [ ] Donation 5 [ ] Other (Specify)	PINE GROVE CEMETERY	HUNTSVILLE, ALABAMA	
21a. SIGNATURE OF FUNERAL DIRECTOR	21b. LICENSE NUMBER OF FUNERAL DIRECTOR	21c. SIGNATURE OF EMBALMER	21d. LICENSE NUMBER OF EMBALMER
▷ MARY KATHRYN PATTON	3379	▷ RON STEWART	3732
22a. NAME AND ADDRESS OF FUNERAL HOME		22b. LICENSE NUMBER OF FUNERAL HOME	
PATTON BROTHERS FUNERAL HOME - 1306 - SOUTH STREET NASHVILLE, TN. 37212		185	

REGISTRAR

23. REGISTRAR'S SIGNATURE	▷ Mary C. Pentecost
24. DATE FILED (Month, Day, Year)	January 14, 1991

CERTIFIER

25a. PHYSICIAN – To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner as stated.

1 [ ] SIGNATURE AND TITLE OF PHYSICIAN ▷	25b. LICENSE NUMBER	25c. DATE SIGNED (Month, Day, Year)
26a. MEDICAL EXAMINER – On the basis of examination and/or investigation, in my opinion, death occurred at the time, and place, and due to the cause(s) and manner as stated.		
2 [ ] SIGNATURE AND TITLE OF MEDICAL EXAMINER ▷ Julia C. Goodin MD	26b. LICENSE NUMBER 16308	26c. DATE SIGNED (Month, Day, Year) 1/9/91

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CERTIFICATE MUST COMPLETE AND SIGN MEDICAL CERTIFICATION

27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print)
Julia C. Goodin, M.D., 84 Hermitage Ave., Nashville, TN 37210-2110

Exhibit A

08868616

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.

Lori B. Ferranti, PhD, MSN, MBA, RN
State Registrar/Asst. Commissioner

John J. Dreyzehner, MD, MPH, FACOEM
COMMISSIONER

0 8 8 6 8 6 1 6

Date Issued: Nov-02-2016

CERTIFICATION OF VITAL RECORD

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STATE OF TENNESSEE
Office of Vital Records

0505409

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): EMMA MAE MILLER
2. SEX: FEMALE
3. DATE OF DEATH (Month, Day, Year): SEPTEMBER 15, 2005
4. SOCIAL SECURITY NUMBER: [redacted]-1147
5a. AGE-LAST BIRTHDAY (Years): 67
5b. UNDER 1 YEAR: MOS. / DAYS.
5c. UNDER 1 DAY: HOURS / MIN.
6. DATE OF BIRTH (Month, Day, Year): April 16, 1938
7. BIRTHPLACE (City and State or Foreign Country): Huntsville, AL
8. EVER IN U.S. ARMED FORCES? 1 Yes 2 [XX] No
8a. PLACE OF DEATH (Check only one): HOSPITAL: 1 Inpatient 2 ER/Outpatient 3 DOA; OTHER: 4 Nursing Home 5 [XX] Residence 6 Other (Specify)
9b. FACILITY NAME (If not institution, give street and number): 1013 Mansfield Avenue
9c. CITY, TOWN, OR LOCATION OF DEATH: Nashville
9d. COUNTY OF DEATH: Davidson
10. MARITAL STATUS-Married, Never Married, Widowed, Divorced (Specify): Widow
11. SURVIVING SPOUSE (If wife, give maiden name): N/A
12a. DECEDENT'S USUAL OCCUPATION (Give kind of work done during most of, working life. Do not use retired.): Head Cook
12b. KIND OF BUSINESS/INDUSTRY: First Baptist Church
13a. RESIDENCE-STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 1013 Mansfield Avenue
CENSUS TRACT: 3
13e. INSIDE CITY LIMITS? 1 [XX] Yes 2 No
13f. ZIP CODE: 37206
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No-If yes, specify Cuban, Mexican, Puerto Rican, etc.) Yes o [XX] No
15. RACE-American Indian, Black, White, etc. (Specify): Black
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 11th; College (1-4 or 5+)

NAME OF DECEDENT: For use by physician or hospital only

PARENTS

17. FATHER'S NAME (First, Middle, Last): Charlie Evans
18. MOTHER'S NAME (First, Middle, Maiden Surname): Mattie Eskins

INFORMANT

19a. INFORMANT'S NAME (Type/Print): Angela Miller
19b. RELATIONSHIP TO DECEASED: Daughter
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 1016 Mansfield Avenue Nashville, Tennessee 37206

DISPOSITION

20a. METHOD OF DISPOSITION: 1 [XX] Burial 2 Cremation 3 Removal from State 4 Donation 5 Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Greenwood Main Cemetery
20c. LOCATION-City or Town, State: Nashville, Tennessee
21a. SIGNATURE OF FUNERAL DIRECTOR: George Baker, Jr.
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 4695
21c. SIGNATURE OF EMBALMER: Ronald Stewart
21d. LICENSE NUMBER OF EMBALMER: 3732
22a. NAME AND ADDRESS OF FUNERAL HOME: PATTON BROTHERS FUNERAL HOME 1306 South Street/Nashville, Tennessee 37212
22b. LICENSE NUMBER OF FUNERAL HOME: 185

REGISTRAR

23. REGISTRAR'S SIGNATURE: [signature]
24. DATE FILED (Month, Day, Year): September 30, 2005

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: [signature]
25b. LICENSE NUMBER: 34172
25c. DATE SIGNED (Month, Day, Year): 9/26/05
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)

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.

SEE INSTRUCTIONS ON OTHER SIDE

		Approximate Interval Between Onset and Death
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a. CARDIOPULMONARY ARREST	
DUE TO (OR AS A CONSEQUENCE OF):	b. LUNG CANCER	
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST	c. DUE TO (OR AS A CONSEQUENCE OF):	
	d. DUE TO (OR AS A CONSEQUENCE OF):	

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 No
29b. WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? 1 Yes 2 No

30. MANNER OF DEATH: 1 [✓] 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-1659 (REV. 6/99)

STATE BATH NO.

RDA 139

Exhibit B

8058123

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

8058123 6/29/2015
Date Issued

JUN 2 9 2015

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

DEPARTMENT OF HEALTH XVI AGRICULTURE COMMERCE TENNESSEE

CERTIFICATION OF VITAL RECORD

Copy

FILED
2005 OCT 12 AM 11:05
RICHARD R. ROOKER, CLERK
B.C.

WILL

OF

EMMA E. MILLER

Exhibit C

Emm.

Copy

WILL

OF

EMMA E. MILLER

I, Emma E. Miller, currently residing in Nashville, Davidson County, Tennessee, and a citizen of the United States of America, make and declare this document as my Will. I revoke all former wills and codicils.

ITEM 1
FAMILY

I have five (5) children, Lorenzo Miller, Angela Miller, Charles Miller, Michael Miller, and Richard Miller. Except as otherwise specified in this Will when I refer to a child by his or her respective name, references in this Will to child or children shall refer to these five (5) children.

ITEM 2
TANGIBLE PERSONAL PROPERTY

I bequeath all of my clothing, jewelry, personal effects, automobiles and all of my other tangible personal property, except for any items specifically bequeathed to another in any document described below in this Item, in one or more of the following ways, as the Executor, exercising an absolute and unlimited discretion, determines to be appropriate: after taking into account the wishes of each child, the Executor may distribute to my children who survive me any items appropriate for each child to have; or the Executor may distribute any items selected for a minor or disabled child to an adult of the Executor's choosing (including the Executor) to hold in safekeeping for such minor or disabled child; or the Executor may sell any items and add the cash proceeds from the sale to my residuary estate.

E. Em.

Emma E. Miller

Copy

After I sign this Will, I may leave a letter or other written document either in my own handwriting or signed by me or both addressing the distribution of certain items of my tangible personal property. If I prepare this document, I will keep it with my Will. If my Executor finds this document, it is my desire that the wishes expressed in such document be carried out.

All bequests under this Item or any document described above in this Item are contingent upon my owning the item or items bequeathed at my death and upon the recipient surviving me, unless I expressly provide otherwise.

ITEM 3
RESIDUARY ESTATE

3.A. Provisions for Children. I devise and bequeath all the rest of the property I own at my death to the Trustee, in trust, for so long as either my son, Michael Miller, or my son, Richard Miller (referred to in this 3.A as the "beneficiary" or "beneficiaries"), is living, in accordance with the remaining provisions of this 3.A.

My primary asset (which I expect will become an asset of this trust) is my home at 1013 Mansfield Avenue, Nashville, Tennessee 37206. I request (but do not direct) that the Trustee allow the beneficiaries to continue living at my home so long as they are able to do so and so long as such living arrangement is feasible, practical, and in the best interests of the beneficiaries. So long as one or both of the beneficiaries are living in my home, I request (but do not direct) that the Trustee allow any family members of mine or of the beneficiaries who are serving as caregivers for the beneficiary or beneficiaries (irrespective of whether such caregivers have been appointed by any court as conservator for any beneficiary) to live at my residence, rent free, along with the beneficiary or beneficiaries.

I intend this trust to conserve assets and to provide a supplement to any income or benefits the beneficiaries might be receiving, may have received in the past, or may be eligible to receive in the future from any source, including the government, as a result of any handicap, and to provide for the burial expenses of the beneficiaries if those expenses are not otherwise provided for. If a beneficiary's incapacity entitles the beneficiary to receive income or benefits from any source, including the government, the purpose of any trust or trust share hereunder for such beneficiary is to provide only for the extra and supplemental care, maintenance, support, education and special needs of such beneficiary.

All assets distributed to this trust for the beneficiaries shall be held in trust and administered and distributed as follows:

E. E. M.
Emma E. Miller

The Trustee shall pay to or provide for the benefit of the beneficiaries, at any time and from time to time, without regard to equality between the beneficiaries, that amount of net income of the trust which will not cause the beneficiaries to be ineligible for governmental financial assistance benefits in the event the beneficiaries are receiving such benefits, and which the Trustee, in the Trustee's sole, absolute and unlimited discretion, deems consistent with the purposes of the trust. Any undistributed income shall be added to principal.

The Trustee may also distribute discretionary amounts of income and principal for special and/or supplemental needs not otherwise provided by governmental financial assistance and benefits, or by the providers of services to the beneficiaries.

"Special and/or supplemental needs" refer to the requisites for maintaining the good health, safety, and welfare of the beneficiaries when, in the sole, unlimited and absolute discretion of the Trustee, such requisites are not being provided by any public agency, office, or department of any state or of the United States.

"Special and/or supplemental needs" shall also include, but not be limited to: medical and dental expenses; annual independent check-ups; clothing and equipment; programs of training, education, treatment and rehabilitation; private residential care; transportation (including vehicle purchase, maintenance, and insurance); and essential dietary needs.

"Special and/or supplemental needs" may also include, but not be limited to: spending money; additional food; clothing; electronic equipment such as radios, record or compact disc players, television sets, video recording devices, DVD players, and computer equipment; camping; vacations; athletic contests; movies; trips; and money to purchase appropriate gifts for relatives and friends.

The Trustee shall have no obligation to expend trust assets for the beneficiaries, but, if the Trustee, in the Trustee's sole, unlimited and absolute discretion, decides to expend trust assets to or for the benefit of the beneficiaries, under no circumstances shall any amounts be paid or reimbursed to the federal government, any state, or any governmental agency for any purpose, including for the care, support and maintenance of the beneficiaries.

Because the beneficiaries may be dependent on the support and aid of others, the Trustee shall, in the exercise of the Trustee's best judgment and fiduciary duty, seek support and maintenance for the beneficiaries from all available public resources including, but not limited to, Social Security Administration benefits, Supplemental Security Income (SSI), U.S. Civil Service Commission benefits, Medicaid, Federal Social Security Disability Insurance (SSDI), and any other comparable state, federal, or local programs.

E. E. M.

Emma E. Miller

The Trustee shall not make payments to or on behalf of the beneficiaries that would threaten receipt of income or support by the beneficiaries from any source. Otherwise, the Trustee shall make whatever payment to the beneficiaries from the income and principal of the trust which the Trustee, in the Trustee's sole, unlimited and absolute discretion, deems consistent with the purposes of this trust. Neither the beneficiaries nor any other person or entity shall have the right to compel any such payment. This trust shall be exempt from court jurisdiction.

The Trustee may make arrangements for the appropriate placement of the beneficiaries. If the beneficiaries reside in or are placed in a residential facility, the Trustee may make payments as the Trustee deems necessary to be used for comforts, luxuries and any other provisions as may not be provided.

If appropriate, the Trustee may take action necessary for the appointment of a conservator or limited guardian for the beneficiaries.

If consistent with the intent of the trust, the Trustee may ask a court to amend this trust so that it conforms to the regulations and policies that are approved by any governing body or agency relating to Supplemental Security Income benefits, Medicaid benefits or any similar successor programs.

No trust or trust share hereunder shall be used to supplant or replace any public assistance benefits of any county, state, federal or governmental agency that serves persons with disabilities that are the same or similar to the impairments of the beneficiaries. For purposes of determining the beneficiaries' eligibility for such benefits, no part of the income or principal of the trust shall be considered available to the beneficiaries. In the event the Trustee is requested by any department or agency to release principal or income to or on behalf of the beneficiaries to pay for equipment, medication or services that other organizations or agencies are authorized to provide, or in the event the Trustee is requested by any department or agency administering such benefits to petition to any Court or any other administrative agency for the release of income or principal for this purpose, the Trustee shall deny such request and is directed to defend, at the expense of the trust estate, any contest of this provision or other attack of any nature.

In determining whether the existence of the trust has the effect of rendering the beneficiaries ineligible to receive any governmental assistance benefits, the Trustee is hereby granted full and complete discretion to initiate administrative or judicial proceedings for the purpose of determining eligibility. All costs related thereto, including reasonable attorney's fees, shall be a proper charge to the trust.

The beneficiaries' trust shall be considered primarily for the benefit of the beneficiaries, and only incidentally for the benefit of the remainderpersons. Consequently, the Trustee shall invest the trust estate and expend amounts from this trust for the benefit of, and to last the

E. E. M.

Emma E. Miller

Copy

lifetime of, the beneficiaries, and in order to provide for the comfort and happiness of the beneficiaries consistent with the purposes of this trust, without regard to the effect that such investments or distributions might have upon the interests of the remainderpersons.

In the event it is determined by either a court or an authority of competent jurisdiction that these trust assets render the beneficiaries ineligible to receive any governmental assistance benefits; or, if the Trustee, in the Trustee's sole, unlimited and absolute discretion, determines, notwithstanding the provisions set forth above, that this trust may be subject to garnishment, attachments, execution, or bankruptcy proceedings by a creditor of the beneficiaries; or by the federal or state government, or any agency or subdivision thereof; then the Trustee shall terminate the trust for the beneficiaries and distribute the remaining principal and accrued income of the trust to the remainderpersons otherwise entitled to receive the trust assets upon the death of the beneficiaries. In such event, I request, but do not direct, that these remainderpersons conserve, manage, and distribute the proceeds of the former trust set aside for the beneficiaries consistent with the purposes of this trust.

Upon the death of the beneficiaries, or upon the earlier termination of the trust as provided in the previous paragraph, all assets of the trust shall be distributed to my children (other than the beneficiaries), in equal shares, outright and free of trust, with the descendants of any deceased child receiving such deceased child's share, per stirpes. If any person (other than the beneficiaries) receiving assets under this provision is under age 25 when an outright distribution of trust principal is to be made to such person, then such person's portion of trust principal shall be distributed by the Trustee to an adult selected by the Trustee (including the Trustee) to hold as custodian for such person under the Tennessee Uniform Transfers to Minors Act to administer for such person until such person is age 25.

ITEM 4
FIDUCIARIES

4.A. Executor. I nominate the following persons to serve as the Executor of this Will, with such persons to act successively, in the order named:

1. My daughter, Angela Miller.

2. My son, Lorenzo Miller.

3. My son, Charles Miller.

To the extent permitted by applicable law, no Executor shall be required to furnish bond, file any inventory or file any accountings with respect to the performance of the Executor's duties.

E. E. M

Emma E. Miller

Copy

4.B. Trustee. I appoint the following persons to serve as the Trustee of any trust created herein, with such persons to act successively, in the order named:

1. My daughter, Angela Miller.

2. My son, Lorenzo Miller.

3. My sister, Diane Johnson.

I direct that no bond be required of any Trustee.

4.C. Conservator. If either of my sons, Michael Miller and Richard Miller, are in need of a court-appointed conservator, I nominate my daughter, Angela Miller, to serve as such conservator, but if she is unable to serve for any reason, then I nominate my sister, Diane Johnson, to serve as such conservator.

ITEM 5
ADMINISTRATIVE PROVISIONS

5.A. Payment of Debts, Administration Expenses and Taxes. All of my legally enforceable debts (except secured debts, which may be paid or retained in the discretion of the Executor), my funeral expenses and the expenses of administration of my estate, both domiciliary and ancillary, shall be paid by my Executor as soon as practicable after my death. My Executor shall pay out of my residuary estate all estate, inheritance and other death taxes which shall become payable by reason of my death, whether in respect of property passing under this Will or otherwise, as an expense of administration, without apportionment.

5.B. Life Insurance. The proceeds of any life insurance payable to my Executor, my Trustee or my estate are to be free from the claims of creditors, and are to be held and distributed as provided by the terms of this Will. My Executor may use (but shall not be required to use) any portion of such proceeds as my Executor deems advisable, exercising a reasonable discretion, for the payment of debts, expenses and taxes, but only if my Executor deems such use of the proceeds to be in the best interests of my legatees and beneficiaries hereunder.

5.C. Real Property. Any real property I own at my death is to be administered as a part of my probate estate subject to the control of the Executor for purposes of administration, as authorized by Tennessee Code Annotated Section 31-2-103(a). So long as the Executor serves, the Executor shall have the same power over the title to real property as an absolute owner would have, including but not limited to the power to sell, mortgage, lease or otherwise convey any

E. E. M.
Emma E. Miller

interest in any real estate without the joinder, consent or approval of any heir, legatee, beneficiary, court or other person, provided that in exercising such power the Executor shall be acting in a fiduciary, not an individual, capacity.

5.D. Powers of Executor and Trustee. In addition to any powers and other related administrative provisions granted or contained elsewhere in this Will, if any, the Executor and Trustee, in the exercise of a reasonable discretion with respect to all property, real and personal, at any time forming a part of my estate or any trust hereunder, may exercise any and all of the powers set forth in Tennessee Code Annotated Section 35-50-110, to the extent applicable, all of which provisions and powers are incorporated herein by reference (as set out in this statute on the date I sign this Will), even if this statute is amended or repealed hereafter and even if my estate or any trust hereunder is administered in a state other than Tennessee. Without in any way limiting the foregoing, the Executor shall at all times during the administration of my estate be vested with all the powers, duties and authority of the Trustee herein provided, and shall be authorized to make payments in the same manner and to the same extent as if the Executor were acting as Testamentary Trustee. I grant to my fiduciaries the power and authority to appoint resident fiduciaries to serve with them when applicable law so requires.

5.E. Distribution to a Minor or Incapacitated Beneficiary. Subject to the provisions of 3.A, which shall supersede this 5.E in the event of any conflict between the provisions of 3.A and the provisions of 5.E, during the minority or incapacity of any beneficiary to whom income or principal is payable under this Will, the Trustee, exercising a reasonable discretion, may make distribution in any one or more of the following ways: (a) directly to such beneficiary such amount as the Trustee may deem advisable as an allowance; (b) to the guardian, conservator or limited guardian (including the Trustee) of the person or of the property of such beneficiary; (c) to a custodian including the Trustee) under the Tennessee Uniform Transfers to Minors Act, including a custodian selected by the Trustee; (d) to a relative (including the Trustee) of such beneficiary upon the agreement of such relative to expend such income or principal solely for the benefit of the beneficiary; or (e) by expending such income or principal directly for such beneficiary. The Trustee shall have the power, in the Trustee's reasonable discretion, to determine whether a beneficiary is incapacitated, and the Trustee's determination in such regard shall be conclusive.

5.F. Spendthrift Provision. Neither the income nor principal of any trust herein created, or any share thereof, shall be pledged, assigned, transferred, sold or in any manner whatsoever accelerated, anticipated or encumbered by any beneficiary, nor shall any income or principal of any trust estate hereunder be in any manner subject to or liable in the hands of the Trustee for the debts, contracts or engagements of any beneficiary or be subject to any assignment or any other voluntary or involuntary alienation or disposition whatsoever; but in all distribution of income or principal, the same shall be paid only to the beneficiary entitled, upon receipt of the beneficiary, or to others for his or her benefit as herein provided.

Emma E. Miller

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5.G. Reports of Trustee. I excuse the Trustee from making any accounting or report to any court or person regarding the administration of the trust herein created, but the Trustee shall furnish to each current or permissible income beneficiary of each trust (or to the parent, guardian or conservator of any minor or incapacitated beneficiary) a statement showing the receipts, disbursements and the estimated net value of the trust, on an annual or more frequent basis. I expressly relieve, waive and release any Trustee hereunder from having to comply with any and all notification requirements of Tennessee Code Annotated Section 35-50-119.

5.H. Resignation of Trustee. Any person serving as a Trustee of the trust hereunder may resign in accordance with the remaining provisions of this Section.

Any Trustee may resign upon thirty (30) days' written notice to the beneficiaries then-receiving or entitled to receive income of the trust and to the next successor Trustee hereunder, if any. If resignation occurs, the successor Trustee designated in the preceding Item of this Will shall serve, but if no successor Trustee is designated or able to serve, the Trustee's successor shall be appointed by a majority of such beneficiaries. If a Trustee becomes incapacitated on account of any physical or mental disability or impairment, as certified by such person's regular physician, or if a Trustee attains 80 years of age, such person shall be deemed for all purposes to have resigned as Trustee.

Any successor Trustee chosen by the beneficiaries hereunder must be independent of, and not related or subordinate to, the person or persons exercising this selection power. If the beneficiaries fail to select a successor Trustee within a thirty (30) day period, the Trustee who has resigned may petition the court having jurisdiction over the trust for the appointment of a successor. The successor Trustee does not have to reside or be located in Tennessee.

Upon appointment of the successor Trustee, the resigning Trustee shall deliver all assets then held to the successor Trustee. The resigning Trustee shall then have full acquittance for all assets so delivered (subject to judicial settlement of the accounts of the resigning Trustee if requested by the person or persons exercising this selection power or by the successor Trustee). A parent, legal guardian, conservator, or closest adult next of kin for any minor or incapacitated beneficiary shall act on behalf of the minor or incapacitated beneficiary concerning selection of any successor Trustee hereunder. The successor Trustee shall have all powers and authority herein conferred on the Trustee so replaced, and bond is excused.

5.I. References to Fiduciaries. For convenience, the fiduciaries named in this Will (including any alternates or successors) are sometimes referred to in the singular person and masculine gender, regardless of the number or gender of those actually named herein.

E. E. M.

Emma E. Miller

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5.J. Distribution to Descendants. Unless specifically provided otherwise herein, references to descendants shall include natural-born and adopted descendants and shall only refer to then-living descendants. Distribution to the descendants of any deceased person under this Will shall be per stirpes.

5.K. Captions. The captions and headings of this Will are for convenience only and shall not define or limit the provisions contained herein.

IN WITNESS WHEREOF, I sign this Will, consisting of this and the preceding eight (8) printed pages, and for the purpose of identification, I have signed or initialled each page, all in the presence of the persons witnessing it, at my request, on this the 21 day of July, 2004, at Nashville, Tennessee.

Emma E. Miller
Emma E. Miller

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Signed and declared by Emma E. Miller, to be such person's Will in the presence of all of us at one and the same time, and we, at such person's request and in such person's presence and in the presence of each other, have subscribed our names as witnesses, and we do hereby attest to the sound and disposing mind of Emma E. Miller and to the performance of the aforesaid act of execution at the place and on the date hereinabove set out.

WITNESSES:

M. Taylor Harris
Name

M. Taylor Harris, JR.
Print or Type Name

Nashville, TN.
Address

Wesley D. Turner
Name

Wesley D. Turner
Print or Type Name

315 Deadrick Street Nashville, Tennessee
Address

THIS WILL PREPARED BY:

ANDRA J. HEDRICK
GULLETT, SANFORD, ROBINSON & MARTIN, PLLC
315 Deaderick Street, Suite 1100
P. O. Box 198888
Nashville, Tennessee 37219-8888
(615) 244-4994

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AFFIDAVIT

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

The undersigned persons, after first being duly sworn according to law, depose and say:

1. They witnessed the execution of the Will of Emma E. Miller, dated the 24th day of July, 2004, to which this Affidavit is attached, and that this Affidavit is being made at the request of such person and in accordance with the provisions of Tennessee Code Annotated Section 32-2-110.

2. Their signatures are affixed to the Will, they signed the Will at the request of such person, and in the presence of such person, and in the presence of each other witness, at the place and on the date recited in said Will.

3. Emma E. Miller signed said paper writing as and for a Will in their sight and presence.

4. At the time they witnessed the Will, Emma E. Miller was, in their opinion, of sound mind.

M. Taylor Harris Jr.
Witness

Wesley D. Turner
Witness

Sworn to and subscribed before me by the two (2) persons whose signatures are affixed hereto on this 21st day of July, 2004.

ANDRA J. HEDRICK NOTARY PUBLIC AT LARGE DAVIDSON COUNTY, TENN.

Notary Public

My Commission Expires:

My Commission Expires NOV. 27, 2004

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IN THE SEVENTH CIRCUIT COURT FOR DAVIDSON COUNTY, TENNESSEE

PROBATE DIVISION

FILED
2005 OCT 12 AM 11:05
RICHARD R. ROOKER, CLERK
D.C.

IN RE:	)	
	)	
PROBATE OF THE LAST WILL AND TESTAMENT OF EMMA E. MILLER	)	**No. 05P-1516**
	)	

ORDER TO PROBATE

This cause came on to be heard on the 12th day of October, 2005, before the Honorable Randy Kennedy, Probate Judge, upon the Petition of **Angela Miller** requesting that a paper writing purporting to be the Last Will and Testament of **Emma E. Miller**, deceased, be admitted to probate, and that Letters Testamentary be issued to the Petitioner.

Whereupon, the Petitioner produced a paper writing purporting to be the Last Will and Testament of **Emma E. Miller**, deceased, said paper writing bearing date of July 21, 2004; having the name **Emma E. Miller** signed thereto as testatrix; being subscribed by **M. Taylor Harris, Jr.** and **Wesley D. Turner** as attesting witnesses; naming **Angela Miller** as Executrix, waiving any bond of said Executrix; and waiving the requirement of filing any inventory or making any accounting to the Court in Item 4.A. on page 5 of the Will.

And, it appearing from the testimony of the aforesaid **M. Taylor Harris, Jr.** and **Wesley D. Turner**, taken upon affidavit as authorized by and in accordance with Tennessee Code Annotated Section 32-2-110, that each of them did subscribe his respective name as an attesting witness to said paper writing; that said paper writing was written in the lifetime of **Emma E. Miller**, and published, signed and subscribed by her in the presence of the attesting witnesses; that said **Emma E. Miller** was then of sound mind; and that, at her request, said attesting

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witnesses signed said paper writing in her presence and in the presence of each other on July 21, 2004.

And, it further appearing that said paper writing bears the true signature of said **Emma E. Miller**; that her usual place of domicile and residence at the time of her death was Davidson County, Tennessee; and that she died in this county on September 15, 2005, at the age of 67 years.

It is, therefore, ORDERED, ADJUDGED AND DECREED that said paper writing is the true, whole and Last Will and Testament of **Emma E. Miller**, deceased; that the same is hereby admitted to probate as such; and that the Clerk is directed to file and record the same and to issue Letters Testamentary to **Angela Miller**, without bond, the same having been waived by the Will and without the necessity of filing any accounting or inventory as provided in the Will, except that an estate status report shall be filed annually so long as the estate remains open.

ENTER:

Randy Kennedy, Probate Judge

APPROVED FOR ENTRY:

GULLETT, SANFORD, ROBINSON & MARTIN, PLLC

By: _____

Andra J. Hedrick, B.P.R. No. 19421
M. Taylor Harris, Jr., B.P.R. No. 2656
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