BILL GARRETT, Davidson County
Trans:T20170020596 DEEDQC
Recvd: 03/09/17 15:31 3 pgs
Fees:17.00 Taxes:0.00
20170309-0023592

THIS INSTRUMENT PREPARED BY:

M2L Law Group, LLC
202 South 11th Street
Nashville, TN 37206
615.650.5100

QUITCLAIM DEED

Address of New Owner(s):	Send Tax Bills to:	Map & Parcel:
1013 Spain, LLC 1719 Hillsdale Avenue San Jose, CA 95124	New Owner	072-10-0P-001.00-CO

FOR AND IN CONSIDERATION of the sum of One Dollar ($1.00), cash in hand paid, the receipt and sufficiency of which is hereby acknowledged, **David Lawver, a single man,** by these presents do hereby quitclaim and convey unto **1013 Spain, LLC, a Wyoming Limited Liability Company,** its heirs, successors and assigns, all his/her/their right, title and interest in and to the following described tract of land:

Land in Davidson County, Tennessee, being Unit No. 1 on the Plan of Spain Avenue Commons, a Horizontal Property Regime With Private Elements of record in Exhibit "B" in the Declaration of Covenants, Conditions and Restrictions at Instrument No. 20150810-0079786, in the Register's Office for Davidson County, Tennessee, to which Plan reference is hereby made for a more complete description of the property.

Being the same property conveyed to David Lawver, a single man, by Warranty Deed from 1013 Spain Avenue, LLC, a Tennessee Limited Liability Company, of record in Instrument No. 20160930-0103017 in the Register's Office for Davidson County, Tennessee, dated September 26, 2016 and recorded September 30, 2016.

This is improved property also known as 1013A Spain Avenue Nashville, TN 37216.

STATE OF TENNESSEE
COUNTY OF DAVIDSON

The actual consideration for this transfer is $ 0.00.

Subscribed and sworn to before me this the 9th day of March, 2017.

Affiant

My commission expires:
(Affix Seal)

Notary Public

ANNE MARIE CHANDLER
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
My Commission Expires September 7, 2020

IN WITNESS WHEREOF, the undersigned has executed this Quitclaim Deed on this ____ day of March, 2017.

David Lawyer

STATE OF CALIFORNIA
COUNTY OF _____ See attached

Personally appeared before me, the undersigned, a Notary Public in and for the County and State, the within named David Lawver, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged that he/she executed the foregoing instrument for the purposes therein contained.

Witness my hand and seal ____ day of March, 2017.

Notary Public

My Commission Expires:

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT **CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Santa Clara)

On 3-10-17 before me Glendora Pitre Notary Public,
Date *Here Insert Name and Title of the Officer*

personally appeared David Lawver,
Name(s) of Signer(s)

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.

WITNESS my hand and official seal.

GLENDORA PITRE
Commission # 2021830
Notary Public - California
Santa Clara County
My Comm. Expires Apr 25, 2017

Signature _____
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document
Title or Type of Document: Quitclaim Deed Document Date: 3/6/17
Number of Pages: 2 Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: David Lawver	Signer's Name: _____
☐ Corporate Officer — Title(s): _____	☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General	☐ Partner — ☐ Limited ☐ General
☑ Individual ☐ Attorney in Fact	☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator	☐ Trustee ☐ Guardian or Conservator
☐ Other: _____	☐ Other: _____
Signer Is Representing: _____	Signer Is Representing: _____

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