WARRANTY DEED

Bill Garrett Davidson County
Batch# 79874 DEEDWARR
04/11/2018 03:33:41 PM 11 pgs
Fees: $58.00 Taxes: $1,720.50

20180411-0034257

STATE OF TENNESSEE
COUNTY OF DAVIDSON

THE ACTUAL CONSIDERATION OR VALUE, WHICHEVER IS GREATER, FOR THIS TRANSFER IS $465,000.00

Affiant

SUBSCRIBED AND SWORN TO BEFORE ME, THIS 4TH DAY OF Apr.1, 2018

Notary Public

MY COMMISSION EXPIRES: 5-3-21

(AFFIX SEAL)

STEVEN T. MORRIS NOTARY PUBLIC STATE OF TENNESSEE DAVIDSON COUNTY MY COMMISSION EXPIRES 5-3-2021

THIS INSTRUMENT WAS PREPARED BY
Hardeman & Montgomery, 4301 Hillsboro Pike, Suite 300, Nashville, TN 37215

ADDRESS NEW OWNER(S) AS FOLLOWS:	SEND TAX BILLS TO:	MAP-PARCEL NUMBERS
1007 Draughon, LLC		
(NAME) 2317 CRUZEN ST.	(NAME) NEW OWNER	118-09-0-101.00
(ADDRESS) NASHVILLE, TN 37211	(ADDRESS)	NEW NUMBERS: 118090P001000
(CITY) (STATE) (ZIP)	(CITY) (STATE) (ZIP)	118090P002000

FOR AND CONSIDERATION OF THE SUM OF TEN DOLLARS, CASH IN HAND PAID BY THE HEREINAFTER NAMED GRANTEES, AND OTHER GOOD AND VALUABLE CONSIDERATIONS, THE RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED, WE, **MARY E. LASSITER, UNMARRIED**, HEREINAFTER CALLED THE GRANTORS, HAVE BARGAINED AND SOLD, AND BY THESE PRESENTS DO TRANSFER AND CONVEY UNTO **1007 DRAUGHON, LLC, A TENNESSEE LIMITED LIABILITY COMAPNY,** HEREINAFTER CALLED THE GRANTEES, THEIR HEIRS AND ASSIGNS, A CERTAIN TRACT OR PARCEL OF LAND IN DAVIDSON COUNTY, STATE OF TENNESSEE, DESCRIBED AS FOLLOWS, TO-WIT:

Land in Davidson County, Tennessee, being Units A & B of Homes At 1007 & 1009 Draughon, a Horizontal Property Regime with Private Elements located at Nashville, Davidson County, Tennessee, and described in a Declaration of Covenants, Conditions and Restrictions for Homes At 1007 & 1009 Draughon, a Horizontal Property Regime with Private Elements, of record as Instrument No. 201802222-0016988, Register's Office for Davidson County, Tennessee, to which reference is hereby made. The easements, restrictive covenants, conditions and regulations imposed upon and relating to the units, property, co-owners and tenants of Homes At 1007 & 1009 Draughon, a Horizontal Property Regime with Private Elements, contained in said Declaration, the plat filed as Exhibit "B" to said Declaration appearing in Instrument No. 20180222-0016988, and Bylaws appended thereto as Exhibit "C", said Register's Office, are incorporated hereby reference and made a part hereof the same as though copied herein for a more complete identification and description of said Unit.

Being the same property conveyed to Mary E. Lassiter by Warranty Deed from Ernest D. Hoglund and wife, Elsa E. Hoglund, recorded on the 17th day of February, 1966 in Deed Book 3988, Page 493, in the Register's Office of Davidson County, Tennessee.

This conveyance is subject to all easements, restrictive covenants and conditions, and all other matters of record, including all items set out on any applicable plat of record.

unimproved _
This is improved x property, known as 1007 & 1009 Draughon Avenue, Nashville, TN 37204
(House Number) (Street) (P.O. Address) (City or Town) (Postal Zip)

TO HAVE AND TO HOLD the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said GRANTEES, their heirs and assigns forever; and we do covenant with the said GRANTEES that we are lawfully seized and possessed of said land in fee simple, have a good right to convey it and the same is unencumbered, unless otherwise herein set out; and we do further covenant and bind ourselves, our heirs and representatives, to warrant and forever defend the title to the said land to the said GRANTEES, their heirs and assigns, against the lawful claims of all persons whomsoever. Wherever used, the singular number shall include the plural, the plural the singular, and the use of any gender shall be applicable to all genders.

Witness my hand this 4 day of April, 2018

Mary E. Lassiter by Brenda Lassiter Forehand

MARY E. LASSITER, BY: BRENDA LASSITER FOREHAND, ATTORNEY IN FACT

STATE OF TENNESSEE

COUNTY OF DAVIDSON

On this 4TH day of April, 2018, before me personally appeared Brenda Lassiter Forehand, to me known (or proved to me on the basis of satisfactory evidence) to be the person who executed the foregoing instrument on behalf of Mary E. Lassiter and acknowledged that he executed the same as the free act and deed of Mary E. Lassiter.

Witness my hand and official seal at Nashville, Tennessee this 4 day of April, 2018.

Commission expires:

JOHN GREGORY HARDEMAN
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY, TENN.
My Commission Expires MAR 8, 2021

Notary Public

DURABLE POWER OF ATTORNEY

OF

Mary Elizabeth Lassiter

I. PRINCIPAL AND ATTORNEY-IN-FACT

I, Mary Elizabeth Lassiter, who reside at 1007 Draughon Avenue, Nashville, Tennessee 37204, appoint the following person to serve as my attorney-in-fact, to act for me in any lawful way with respect to the subjects indicated below:

Name: Barbara Lassiter Kleine
Address: 1136 Oak Creek Drive
Nolensville, Tennessee 37135

If Barbara Lassiter Kleine resigns or is unable or unwilling to serve or continue to serve as my attorney-in-fact, I appoint the following person to serve as my successor attorney-in-fact:

Name: Brenda Lassiter Forehand
Address: 7912 Stallion Drive
Nashville, Tennessee 37221

II. EFFECTIVE TIME

This power of attorney is effective immediately, and will not be affected by subsequent disability or incapacity of the principal. This is a durable power of attorney.

Pursuant to the Health Insurance Portability and Accountability Act of 1996 ("**HIPAA**") and all other applicable state and federal laws, and exclusively for the purpose of making a determination of my incapacitation or incapability of managing my financial affairs and obtaining an affidavit of such incapacitation by a physician, I authorize any health care provider to disclose to the person named herein as my "attorney-in-fact" any pertinent individually identifiable health information sufficient to determine whether I am mentally or physically capable of managing my financial affairs. In exercising such authority, my attorney-in-fact constitutes my "personal representative" as defined by HIPAA.

III. POWERS OF ATTORNEY-IN-FACT

To the extent permitted by law, my attorney-in-fact may act in my name, place, and stead in any way that I myself could with respect to the following matters:

YOUR ATTORNEY-IN-FACT SHALL BE AUTHORIZED TO ENGAGE ONLY IN THOSE ACTIVITIES THAT ARE INITIALED.

MEL REAL ESTATE TRANSACTIONS:

- Manage, sell, transfer, lease, mortgage, pledge, refinance, insure, maintain, improve, collect and receive rent, sale proceeds, and earnings, pay taxes, assessments, and charges, and perform any and all other acts with respect to real property and interests in real property that I own now or later acquire.
- Defend, settle, and enforce by litigation a claim to real property and interests in real property that I own now or later acquire.
- Buy, lease, or otherwise acquire real property or an interest in real property, including the authority to enter into listing agreements and purchase and sale contracts, and to sign escrow instructions.

- Execute deeds, mortgages, releases, satisfactions, and other instruments relating to real property and interests in real property that I own now or later acquire.
- Hire and discharge accountants, bookkeepers, property managers, and other professionals providing services related to real property and interests in real property that I now own or later acquire.
- Exercise all powers with respect to real property and interests in real property that I could if present and under no disability.

M.E.S. TANGIBLE PERSONAL PROPERTY TRANSACTIONS:

- Buy or otherwise acquire ownership or possession of, sell or otherwise dispose of, mortgage, pledge, assign, lease, insure, maintain, improve, pay taxes on, otherwise manage tangible personal property and interests in tangible personal property that I now own or later acquire, and exercise all powers with respect to personal property and interests in personal that I could if present and under no disability.

M.E.S. FINANCIAL INSTITUTION TRANSACTIONS:

Conduct any business with banks, savings and loan associations, credit unions, and other financial institutions, including but not limited to the authority to:

- Sign and endorse all checks and drafts in my name.
- Deposit and withdraw funds from accounts.
- Open, maintain, and close accounts or other banking arrangements.
- Open, continue, and have access to all safe deposit boxes, and add and remove items from them.
- Borrow money, pledge property as security, and negotiate terms of debt payments.
- Apply for and receive letters of credit, credit cards, and traveler's checks, and give an indemnity or other agreement in connection with letters of credit.
- Exercise all powers with respect to financial institution transactions that I could if present and under no disability.

M.E.K. INSURANCE AND ANNUITY TRANSACTIONS:

- Obtain, modify, renew, convert, rescind, pay the premium on, or terminate insurance and annuities of all types for myself and for my family and other dependents.
- Designate the beneficiary of the contract, but the attorney-in-fact may be named a beneficiary of the contract, or an extension, renewal, or substitute for it, only if the attorney-in-fact was named as a beneficiary under a contract procured by the principal before signing this power of attorney.
- Surrender and receive the cash value, borrow against, or pledge any insurance or annuity policy.
- Exercise all powers with respect to insurance and annuity transactions that I could if present and under no disability.

M.E.K. ESTATE AND TRUST TRANSACTIONS:

- To act for me in all matters that affect a trust, probate estate, guardianship, conservatorship, escrow, custodianship, or other fund from which I am now, claim to be, or later become entitled, as a beneficiary, to a share or payment, including but not limited to the authority to sign a qualified disclaimer pursuant to Internal Revenue Code Section 2518 and applicable state law, and petitions, objections, waivers, consents, receipts, settlements, and other agreements relating to the above-referenced matters or proceedings.
- Transfer any of my property to a living trust that I created as a grantor before this power of attorney was signed.
- Exercise all powers with respect to estate and trust transactions that I could if present and under no disability.

M.E.K. LEGAL ACTIONS:

To act for me in all legal matters, whether claims in my favor or against me, including but not limited to the authority to retain and discharge attorneys on my behalf; appear for me in all actions and proceedings, commence actions in my name, sign all documents, submit claims to arbitration or mediation, settle claims, and pay judgments and settlements; and exercise all powers with respect to legal actions that I could if present and under no disability.

M.E.L. GOVERNMENT ASSISTANCE:
Claim and collect benefits from the Social Security Administration, including, but not limited to, retirement benefits, supplemental social security, and social security disability benefits and, Medicare, Medicaid, or state, local, and other government programs or civil or military service, and to exercise all powers with respect to government assistance that I could if present and under no disability.

M.E.L. TAX MATTERS:

- Prepare, exercise any available election, and sign any federal or state tax returns, extensions, and related documents.
- Hire and discharge accountants and bookkeepers.
- Pay taxes due, collect refunds, post bonds, and receive confidential information.
- Execute waivers, consents, and closing agreements.
- Represent me in all income tax matters before any federal, state, or local tax collecting agency.
- Exercise all powers with respect to taxes that I could if present and under no disability.

M.E.L. GIFTS:
Make gifts from my assets, including debt forgiveness and gifts to my attorney-in-fact.

My attorney-in-fact is empowered to take all further action, including the payment of expenditures and the preparation and execution of all documents, as my attorney-in-fact deems necessary or appropriate to fully effectuate the purposes of the foregoing matters.

IV. GENERAL PROVISIONS

1. Reliance By Third Parties. I hereby agree that any third party receiving a duly executed copy of this document may rely on and act under it. Revocation or termination of this power of attorney will be ineffective as to a third party unless and until that third party receives actual notice or knowledge

of the revocation or termination. For myself and for my heirs, executors, legal representatives, devisees, and assigns, I hereby agree to indemnify and hold harmless any third party from any and all claims because of good faith reliance on this instrument.

2. Severability. If any provision in this power of attorney is found to be invalid or unenforceable, this invalidity or unenforceability will not affect the other provisions of this document, and the other provisions will be given effect without the invalid or unenforceable provision.

3. Revocation. I may revoke this power of attorney at any time.

4. Accounting. My attorney-in-fact shall provide an accounting for all funds handled and all acts performed as my attorney-in-fact, but only upon my request, the request of a personal representative or a fiduciary acting on my behalf, or court order. Any requirement of my attorney-in-fact to file inventories and accounts with the county clerk or with the court is specifically waived.

5. Compensation and Reimbursement. My attorney-in-fact is entitled to reasonable compensation for services provided on my behalf pursuant to this power of attorney. My attorney-in-fact will be reimbursed for all reasonable expenses incurred relating to his or her responsibilities under this power of attorney.

6. Personal Benefit Permitted. If my attorney-in-fact is acting in good faith and in my best interests, my attorney-in-fact may personally benefit or profit from transactions taken on my behalf.

7. Liability of Attorney-in-Fact. All persons or entities that in good faith endeavor to carry out the provisions of this power of attorney will not be liable to me, my estate, or my heirs for any damages or claims arising because of their actions or inactions based on this power of attorney. My estate will indemnify and hold them harmless. A successor attorney-in-fact will not be liable for the acts of a prior attorney-in-fact.

IN WITNESS WHEREOF, the undersigned has executed this power of attorney on the date set forth below.

Date: 9/19/2011

Mary Elizabeth Lassiter

Signature of Mary Elizabeth Lassiter

This document was prepared by:

Name: Brenda Lassiter Forehand

Address: 7912 Stallion Drive
Nashville, Tennessee 37221

WITNESSES

By signing as a witness, I am acknowledging the signature of the principal who signed in my presence, and the fact that he or she stated that this power of attorney reflects his or her wishes and is being executed voluntarily. I believe the principal to be of sound mind. I have not been appointed as attorney-in-fact by the principal, am not related to him or her by blood, marriage, or adoption, and, to the best of my knowledge, am not entitled to any portion of his or her estate under his or her last will and testament.

1. _____ _____
(Signature of witness) (Print Name)

4117 Hillsboro PK
(Address)

Nashville, TN 37215
(City, State, ZIP)

2. _____ Chris Dobbs
(Signature of witness) (Print Name)

4117 Hillsboro PK
(Address)

Nashville, TN 37215
(City, State, ZIP)

ACKNOWLEDGMENT
OF NOTARY PUBLIC

State of Tennessee

County of Davidson

On this 19th day of September, 20 11, before me, the undersigned Notary Public, personally appeared Mary Elizabeth Lassiter, personally known to me (or proved to me on the basis of satisfactory evidence) to be the individual who signed the foregoing power of attorney and acknowledged to me that he or she executed the same in his or her authorized capacity, and that by such signature, the person executed the instrument.

Witness my hand and seal.

Signature of Notary Public: Randal P Wall

