Bill Garrett Davidson County
Batch# 87339 DEEDQC
05/02/2018 09:20:17 AM 3 pgs
Fees: $17.00 Taxes: $0.00
20180502-0041466

This Instrument Prepared by:
BONE MCALLESTER NORTON PLLC
131 Saundersville Road, Suite 130
Hendersonville, Tennessee 37075
615.822.8822

QUITCLAIM DEED

Address New Owner(s)	Send Tax Bills to:	Map & Parcel Nos.:
2421 Adlai LLC 1941 Pacific Ave San Francisco, CA 94109	SAME	059 16 0 258.00

FOR AND IN CONSIDERATION of the sum of Ten Dollars ($10.00) and other good and valuable consideration, receipt of which is hereby acknowledged, **Matthew Kaminski ("Grantor")**, does hereby quitclaim and convey unto **2421 Adlai LLC ("Grantee")**, its successors and assigns, all of Grantor's right, title and interest in and to certain property located in Davidson County, Tennessee, and more particularly described as follows:

> Being Lot No. 5 on the final Plat of Adlai Street Subdivision, as shown on plat of record in Instrument No. 20010626-0067556, Register's Office for Davidson County, Tennessee, to which plat reference is hereby made for a more complete description of said property.
>
> Being same property conveyed to Matthew Kaminski by Warranty deed from Lestria Alexis Jefferson, in Instrument No. 20171207-0124953, Register's Office for Davidson County, Tennessee, dated December 7, 2017.

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

THE PREPARER OF THIS DEED MAKES NO REPRESENTATION AS TO THE STATUS OF TITLE TO THE PROPERTY DESCRIBED HEREIN. THIS DEED HAS BEEN PREPARED SOLELY FROM INFORMATION FURNISHED TO THE PREPARER, WHO MAKES NO REPRESENTATION WHATSOEVER OTHER THAN IT HAS BEEN ACCURATELY TRANSCRIBED FROM THE INFORMATION PROVIDED.

IN WITNESS WHEREOF, the Grantor has caused this instrument to be executed on this 12th day of April, 2018.

MATTHEW KAMINSKI

STATE OF California)
COUNTY OF San Francisco

Personally appeared before me, Gary Hirsch a Notary Public in and for said County and State, **MATTHEW KAMINSKI**, the maker herein named, with whom I am personally acquainted, and who acknowledge that she executed the within instrument for the purposes therein contained.

WITNESS my hand and seal at office in San Francisco, San Francisco County, California, this 12 day of April, 2018.

GARY HIRSCH
COMM. # 2161406
NOTARY PUBLIC - CALIFORNIA
SAN FRANCISCO COUNTY
My Comm. Expires August 26, 2020

NOTARY PUBLIC

My Commission Expires: Aug 26, 2021

STATE OF California)
COUNTY OF San Francisco

The actual consideration for this transfer is $0.

AFFIANT

Subscribed and sworn to before me, this 12 **day of** April **, 2018.**

NOTARY PUBLIC

My Commission Expires:
Aug 26, 2020

GARY HIRSCH
COMM. # 2161406
NOTARY PUBLIC - CALIFORNIA
SAN FRANCISCO COUNTY
My Comm. Expires August 26, 2020

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 San Francisco)

On April 12, 2018 before me, Gary Hirsch, Notary Public,
Date *Here Insert Name and Title of the Officer*

personally appeared Matthew Kaminski
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.

Signature _____
Signature of Notary Public

CSS1 GARY HIRSCH COMM. # 2161406 NOTARY PUBLIC - CALIFORNIA SAN FRANCISCO COUNTY My Comm. Expires August 26, 2020 CSS1

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: _____ Number of Pages: _____
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name:	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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