Karen Johnson Davidson Cou...
Batch# 191231 DEEDWARR
02/04/2019 10:46:37 AM 3 pgs
Fees: $18.00 Taxes: $537.42

20190204-0010282

This Instrument Prepared By and Returned To:

Concord Title
10690 Murdock Drive
Knoxville, TN 37932
File No. 20191423

After Recording Return To The Above.

I hereby swear or affirm that the actual consideration for this transfer, or the value of the Premises, whichever is greater, is **$145,250.00**; which is equal to or greater than the amount the Premises would command at a fair and voluntary sale.

Affiant

Sworn to and subscribed before me this 30th day of January, 2019.

Notary Public
My Commission Expires: 5/6/19

T. P. BOSHEARS
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

WARRANTY DEED

THIS INDENTURE, made this 30th day of January, 2019, among:

ILDA M MCFARLIN, *by and through its duly appointed attorney-in-fact,*

of Davidson County, Tennessee including all heirs, successors and/or assigns (the "**Grantor**")

AND

Music City Holdings, LLC
A Texas limited liability company

of Davidson County, Tennessee, including all heirs, successors and/or assigns (the **"Grantee"**).

WITNESSETH:

THAT the Grantor, for and in consideration of $10.00 Dollars and other good and valuable consideration, paid in hand, the receipt and sufficiency of which is hereby acknowledged, does grant, bargain, sell, transfer, convey and set over unto Grantee the following described real property hereinafter referred to as the "Premises".

Land in Davidson County, Tennessee, being Lot No. 31 on the Plan of Victory Heights Subdivision of record in Plat Book 1130, Page 97, in the Register's Office for Davidson County, Tennessee, to which Plan reference is hereby made for a more complete description of the property.

Including but excluding that portion of the above described property conveyed to the State of Tennessee by Judgment of record in Book 4213, Page 933, of the Register's Office for Davidson County, Tennessee.

Being a portion of the same property conveyed to Charles Edgar McFarlin and wife, Ilda M. McFarlin by warranty deed from Percy Palmore and wife, Carol R. Palmore of record in Book 2200, page 203 Register's Office for Davidson County , Tennessee, dated October 13, 1953 and recorded on October 14, 1953.

Charles Edgar McFarlin and wife, Ilda M. McFarlin were married at the time they took title to the Premises and were never legally separated or divorced. Charles Edgar McFarlin died on or about February 28, 2005 leaving Ilda M. McFarlin as the surviving tenant-by-the-entireties. A copy of the death certificate is attached as exhibit A.

Being also known as 927 Chickasaw Ave Nashville, TN 37207.

TOGETHER WITH AND SUBJECT TO all hereditaments and appurtenances deriving therefrom or appertaining thereto including, without limitation, matters filed for record with the aforesaid Register's Office and/or shown on plats or maps of same, if any; further releasing all claims to homestead and dower therein. TO HAVE AND TO HOLD THE Premises by the Grantee, their heirs and assigns forever.

SUBJECT TO all applicable restrictions, easements, agreements, notations, setback lines and/or matters affecting the Premises filed for record in the aforesaid Register's Office.

FURTHERMORE, the Grantor hereby covenants with Grantee that they are lawfully seized in "fee simple" of the Premises, have full power, authority and right to convey the same; that the Premises are free from all liens, other than those described above and property taxes for the current year, which shall be prorated between the parties on the date title to the Premises is transferred to Grantee, the payment of which shall be the responsibility of Grantee; and that Grantor will forever warrant and defend the Premises and title thereto against lawful claims of **ALL PERSONS WHOMSOEVER.**

THE SOURCE of the above description is derived from the previous deed of record, no boundary survey having been made at the time of this conveyance.

WHENEVER in this instrument a pronoun is used it shall be construed to represent either singular or plural, as the case may demand.

IN WITNESS WHEREOF the undersigned have executed this instrument on the date first above written by and through its designated attorney-in-fact and pursuant to a properly executed Power-of-Attorney instrument conveying all necessary authority to execute this instrument on behalf of the Grantor; the instrument authorizing the attorney-in-fact is filed for record in Insttrument: 20190204-001028\, in the aforementioned Registers Office.

Ilda M. McFarlin by Kenneth Earl McFarlin, **Attorney-in-Fact**

Ilda M. McFarlin

State of Tennessee
County of Williamsom

Personally appeared before me, the undersigned authority, a Notary Public in and for said County and State aforesaid, **Kenneth Earl McFarlin**, the within named bargainor(s), with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that he/she/they executed the within instrument for the purposes therein contained, and who further acknowledged that such person is the attorney-in-fact of **Ida M. McFarlin ,** the maker, and as authorized by the maker, to execute this instrument on behalf of the maker for the purposes therein contained.

Witness my hand and official seal this 30th day of January, 2019.

Notary Public
My Commission Expires: 5/6/19

STATE OF TENNESSEE NOTARY PUBLIC WILLIAMSON CO.

Owner Name & Property Address:

Name: Music City Holdings, LLC
Address: 927 Chickasaw Ave
City, State, Zip: Nashville, TN 37207

Responsible Party For Taxes:

Name: Music City Holdings, LLC
Address: 927 Chickasaw Ave
City, State, Zip: Nashville, TN 37207

Tax ID: 072 09 0 02900

METROPOLITAN GOVERNMENT OF NASHVILLE & DAVIDSON COUNTY
Office of Vital Records

0501312

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER

TYPEPRINT IN PERMANENT BLACK INK FOR INSTRUCTIONS SEE HANDBOOK

1. DECEDENT'S NAME (First, Middle, Last): Charles Edgar McFarlin
2. SEX: Male
3. DATE OF DEATH (Month, Day, Year): February 28, 2005
4. SOCIAL SECURITY NUMBER: 415-30-9444
5. AGE-Last Birthday (Years): 80
6. DATE OF BIRTH: Sept 1, 1924
7. BIRTHPLACE (City and State or Foreign Country): Little Lot, Tennessee
8. WAS DECEDENT EVER IN U.S. ARMED FORCES? 1 Yes 2 No
9. PLACE OF DEATH: 1 Inpatient 2 ER/Outpatient 3 DOA 4 Nursing Home 5 Residence 6 Other (Specify)
9a. FACILITY NAME (If not institution, give street and number): Skyline Medical Center
9b. CITY, TOWN, OR LOCATION OF DEATH: Nashville
9d. COUNTY OF DEATH: Davidson
10. MARITAL STATUS: Married
11. SURVIVING SPOUSE: Ilda Bresee
12a. DECEDENT'S USUAL OCCUPATION: Carpenter
12b. KIND OF BUSINESS/INDUSTRY: Self-Employed
13a. RESIDENCE-STATE: Tennessee
13b. COUNTY: Davidson
13c. CITY, TOWN OR LOCATION: Nashville
13d. STREET AND NUMBER OR RURAL LOCATION: 927 Chickasaw Ave.
CENSUS TRACT
13e. INSIDE CITY LIMITS? 1 Yes 2 No
13f. ZIP CODE: 37207-
14. WAS DECEDENT OF HISPANIC ORIGIN? (Specify Yes or No; if yes, specify Cuban, Mexican, Puerto Rican, etc.) 1 Yes 0 No
15. RACE—American Indian, Black, White, etc. (Specify): White
16. DECEDENT'S EDUCATION (Specify only highest grade completed): Elementary/Secondary (0-12): 10; College (1-4 or 5+):
17. FATHER'S NAME (First, Middle, Last): George C. McFarlin
18. MOTHER'S NAME (First, Middle, Maiden Surname): Myrtle Lawson
19a. INFORMANT'S NAME (Type/Print): Mrs. Ilda McFarlin
19b. RELATIONSHIP TO DECEASED: Wife
19c. MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code): 927 Chickasaw Ave. Nashville, TN. 37207
20a. METHOD OF DISPOSITION: 1 Burial 2 Cremation 3 Removal from State 4 Donation 5 Other (Specify)
20b. PLACE OF DISPOSITION (Name of cemetery, crematory, or other place): Hill Top Cemetary
20c. LOCATION—City or Town, State: Hickman County, Tennessee
21a. SIGNATURE OF FUNERAL DIRECTOR: Shane A. Dolle
21b. LICENSE NUMBER OF FUNERAL DIRECTOR: 4406
21c. SIGNATURE OF EMBALMER: Lori Gregory
21d. LICENSE NUMBER OF EMBALMER: 5731
22a. NAME AND ADDRESS OF FUNERAL HOME: Phillips-Robinson Company, 2707 Gallatin Road, Nashville, Tennessee 37216
22b. LICENSE NUMBER OF FUNERAL HOME: 331
23. REGISTRAR'S SIGNATURE:
24. DATE FILED (Month, Day, Year): March 4, 2005
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: Stephen Dennis MD
25b. LICENSE NUMBER: 9568
25c. DATE SIGNED (Month, Day, Year): 3-9-05
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:
26b. LICENSE NUMBER:
26c. DATE SIGNED (Month, Day, Year):
27. NAME AND ADDRESS OF CERTIFIER (PHYSICIAN OR MEDICAL EXAMINER) (Type/Print): Suite 430 3443 Dickerson Pike Nashville, TN 37207
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.

		Approximate Interval Between Onset and Death
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a. Ventricular Fibrillation	
Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST	DUE TO (OR AS A CONSEQUENCE OF): b. Athrosclerotic Heart Disease	
	DUE TO (OR AS A CONSEQUENCE OF): c. Peripheral Vascular Disease	
	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.: COPD, Anxiety disorder

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)

(EV 6/96)

BIRTH NO.

RDA 1389

I by the above to be a true and correct copy of the original document on file in this department. This certified copy is valid only on security paper showing the red embossed seal of the Metropolitan Government of Nashville and Davidson County. Erasure voids this certification.

Code Annotated 68-3-101 et seq., Vital Records Act of 1977.

[redacted]

Tonya Y Foreman
Tonya Y Foreman
Local Registrar

8/2/2007
Date Issued

CERTIFICATION OF VITAL RECORD