ESTATE ADMINISTRATOR DEED

State of Tennessee
County of Davidson

The actual consideration for this transfer is $ -1

Affiant

Subscribed and sworn to before me, this the 28th day of December, 2020.

Notary Public

My commission expires: 10-2-2023

(AFFIX SEAL)

JESSICA AMY BELLEW
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 10-2-2023

Karen Johnson Davidson County
Batch# 578086 DEEDWARR
02/25/2021 09:25:16 AM 4 pgs
Fees: $22.00 Taxes: $0.00

20210225-0023588

THIS INSTRUMENT WAS PREPARED BY
Vanderkooi Law, PLC
718 Thompson Lane, Suite 108-235, Nashville, TN 37204

Address of New Owner(s) as follows:	Send Tax Bills To:	Map-Parcel Number
209 Aldwych Way **Antioch, TN 37013**	**OWNER: Macarena Castillo**	**Map: 149-01-0-8** **Parcel: 104.00 00**

WHEREAS, Rodolfo Castillo, Sr. (the "Decedent") was the owner of certain property located in Davidson County, Tennessee, having owned said property solely (See Exhibit A Death Certificate of Rodolfo Castillo, Sr.), the Property is more particularly described below (the "Property"); and

WHEREAS, Decedent died Intestate on October 13, 2019 the Administration of the Intestate Estate of Rodolfo Castillo, Sr. has been filed as Probate Case Number 19P2043, Davidson County Probate Clerk's Office; and **Macarena Castillo**, appointed as Estate Administrator, has been issued Letters of Administration, attached hereto as Exhibit B.

WHEREAS, pursuant Tennessee law, title to this real property vested upon his death to his Spouse and Children, as Heirs-at-Law, Macarena Castillo, Priscilla Castillo, Rodolfo Castillo, Jr. and Luis Ricardo Martinez Serna.

WHEREAS, Macarena Castillo would, as the Decedent's spouse, inherit one third percent (1/3%) of this real property, Priscilla Castillo, Rodolfo Castillo, Jr. and Luis Ricardo Martinez Serna have all inherited twenty three decimal thirty-three percent (23.33%) as Joint Tenants in Common.

NOW, THEREFORE, FOR AND IN CONSIDERATION OF THE SUM OF ONE DOLLAR, CASH IN HAND PAID BY THE HEREINAFTER NAMED GRANTEES, AND OTHER GOOD AND VALUABLE CONSIDERATION, THE RECEIPT OF WHICH IS HEREBY ACKNOWLEDGED, I,

Macarena Castillo, as Administrator of the Estate of Rodolfo Castillo, Sr.,

HEREINAFTER CALLED THE GRANTOR, HAS CONVEYED SAID REAL PROPERTY TO MACARENA CATILLIO, PRISCILLA CASTILLO, RODOLFO CASTILLO, JR. AND LUIS RICARDO MARTINEZ SERNA AS HEIRS AT LAW.

THE GRANTOR ASSIGNS ALL OF THE GRANTOR'S INTEREST, AS ESTATE ADMINISTRATOR OF

THE DECEDENT'S ESTATE, IN AND TO A CERTAIN TRACT OR PARCEL OF LAND IN DAVIDSON COUNTY, TENNESSEE, DESCRIBED AS FOLLOWS, TO-WIT:

Land in Davidson County, Tennessee, being Reserve Parcel B on the Plan of Piccadilly Square, Phase 3, of record in Plat Book 6250, pages 892-894, Register's Office for Davidson County, Tennessee to which plan reference is hereby made for a more complete and accurate description of said lot.

O.C. Rushing and wife, Patricia Rushing reserved an easement for the exclusive use and possession of the westerly 40 feet of the subject tract together with use of the outbuilding for so long as the grantors own the contiguous property at 420 Hamstead South. Upon sale of the property at 420 Hamstead South the easement shall automatically terminate. 420 Hamstead South has, in fact, been sold to owners other than the Rushings terminating said easement.

BEING the same property conveyed to Rodolfo Castillo by deed from O.C. Rushing and wife, Patricia Rushing, married, filed of record in Book 10429, page 297, Register's Office for Davidson County, Tennessee.

THIS conveyance is subject to any and all existing easements, restrictions and building setback lines of record.

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

This is Improved ( ) Unimproved (X) property, known as: **Reserve Parcel B on the Plan of Piccadilly Square**

Witness my hand this 28th day of December, 2020.

Macarena Castillo, Administrator of the Estate of Rodolfo Castillo, Sr.

JESSICA AMY BELLEW
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 10-2-2023

STATE OF TENNESSEE)
)
COUNTY OF DAVIDSON)

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, the within named **Macarena Castillo, Administrator of the Estate of Rodolfo Castillo, Sr.**, the Grantor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that she executed the within instrument for the purposes therein contained.

Witness my hand and official seal this 28th day of December, 2020.

Jessica Bellew
Notary Public

My Commission Expires: 10-2-2023

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2019 058418

1. DECEDENT'S LEGAL NAME: RODOLFO CASTILLO					2. SEX: MALE	3. DATE OF DEATH: 10/13/2019
4. TIME OF DEATH (Approx.): 14:24	5a. AGE: 54	5b. UNDER 1 YEAR: Months / Days	5c. UNDER 1 DAY: Hours / Minutes		6. DATE OF BIRTH: 04/16/1965	7. BIRTHPLACE: DEL RIO, TX
8a. PLACE OF DEATH: INPATIENT						
8b. FACILITY NAME: VANDERBILT UNIVERSITY MEDICAL CENTER		8c. CITY OR TOWN: NASHVILLE				8d. COUNTY OF DEATH: DAVIDSON
9. MARITAL STATUS: MARRIED	10. SURVIVING SPOUSE (name prior to first marriage): MACARENA SERNA		11a. DECEDENT'S USUAL OCCUPATION: OWNER/OPERATOR			11b. KIND OF BUSINESS/INDUSTRY: FOOD SVC-RESTAURANT
12. SOCIAL SECURITY NUMBER: 396	13a. RESIDENCE-STATE OR FOREIGN COUNTRY: TENNESSEE		13b. COUNTY: DAVIDSON			13c. CITY OR TOWN: ANTIOCH
13d. STREET AND NUMBER: 209 ALDWYCH WAY		13e. INSIDE CITY LIMITS?: YES	13f. ZIP CODE: 37013			14. WAS DECEDENT EVER IN US ARMED FORCES?: NO
15. DECEDENT'S EDUCATION: BACHELOR'S DEGREE	16. DECEDENT OF HISPANIC ORIGIN?: YES, MEXICAN, MEXICAN AMERICAN, OR CHICANO		17. DECEDENT'S RACE: OTHER (HISPANIC)			
18. FATHER'S NAME: JUAN CASTILLO			19. MOTHER'S NAME PRIOR TO FIRST MARRIAGE: MARIA MAYO			
20a. INFORMANT'S NAME: MACARENA CASTILLO	20b. RELATIONSHIP TO DECEDENT: WIFE		20c. MAILING ADDRESS: 209 ALDWYCH WAY, ANTIOCH, TN 37013			
21a. METHOD OF DISPOSITION: CREMATION	21b. PLACE OF DISPOSITION: MIDDLE TN CREMATION CENTER		21c. LOCATION: MOUNT JULIET TN			
22a. SIGNATURE OF FUNERAL DIRECTOR: ▶ /s/ WENDELL L. BYRD	22b. LICENSE NUMBER: 2556	22a. SIGNATURE OF EMBALMER: ▶ /s/ Rick D Chester			22d. LICENSE NUMBER: 3418	
23a. NAME AND ADDRESS OF FUNERAL HOME: WOODBINE FUNERAL HOME INC - HICKORY CHAPEL, 5852 NOLENSVILLE ROAD, NASHVILLE, TN 37211					23b. LICENSE NUMBER: 780	
24. REGISTRAR'S SIGNATURE: ▶ /s/ EDWARD G BISHOP III				25. DATE FILED: 10/21/2019		

26. CERTIFIER
26a. ☒ PHYSICIAN – TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE DATE, TIME, AND PLACE, AND DUE TO THE CAUSE(S) AND MANNER STATED.
26b. ☐ MEDICAL EXAMINER – ON THE BASIS OF EXAMINATION AND/OR INVESTIGATION IN MY OPINION, DEATH OCCURRED AT THE DATE, TIME, AND PLACE, AND DUE TO THE CAUSE(S) AND MANNER STATED

PHYSICIAN OR MEDICAL EXAMINER EXECUTING CAUSE OF DEATH MUST COMPLETE AND SIGN WITHIN 48 HOURS

27a. CERTIFIER	27b. LICENSE NUMBER	27c. DATE SIGNED
▶ /s/ STEPHANIE NORFOLK	64709	10/14/2019

27d. NAME AND ADDRESS: STEPHANIE NORFOLK THE VANDERBILT CLINIC 8617 TVC, NASHVILLE, TN 37232

28. PART I. ENTER THE CHAIN OF EVENTS (DISEASES, INJURIES, OR COMPLICATIONS) THAT DIRECTLY CAUSED THE DEATH. DO NOT ENTER TERMINAL EVENTS SUCH AS CARDIAC ARREST, RESPIRATORY ARREST, OR VENTRICULAR FIBRILLATION WITHOUT SHOWING THE ETIOLOGY. ENTER ONLY ONE CAUSE ON A LINE.

		Approximate Interval: Onset to Death
IMMEDIATE CAUSE (Final disease or condition resulting in death)	a. SHOCK	
DUE TO (OR A CONSEQUENCE OF)	b. LACTIC ACIDOSIS	
DUE TO (OR A CONSEQUENCE OF)	c.	
DUE TO (OR A CONSEQUENCE OF)	d.	

PART II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: DIABETES MELLITUS, PANCREATITIS

29a. WAS AN AUTOPSY PERFORMED?: YES
29b. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH?: NO

30. MANNER OF DEATH	31. DID TOBACCO USE CONTRIBUTE TO DEATH?	32. IF FEMALE
NATURAL	UNKNOWN	N/A

33. IF TRANSPORTATION INJURY, SPECIFY:	34a. DATE OF INJURY	34b. TIME OF INJURY	34c. INJURY AT WORK?	34d. PLACE OF INJURY
	34e. DESCRIBE HOW INJURY OCCURRED		34f. LOCATION OF INJURY	

PH-1659 (Rev. 8-2017) RDA 10112

11623997

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

Edward G. Bishop III
State Registrar

Lisa Piercey, MD, MBA, FAAP
Commissioner

1 1 6 2 3 9 9 7

Date Issued: Oct-24-2019

CERTIFICATION OF VITAL RECORD

IN THE CIRCUIT COURT OF DAVIDSON COUNTY, TENNESSEE

(PROBATE DIVISION)

LETTERS OF ADMINISTRATION

TO: **MACARENA CASTILLO** DOCKET NO: **19P2043**

*It appearing to the Court that **RODOLFO CASTILLO SR** has died leaving no Will, and the Court being satisfied as to your claim to said Administration, you have given Bond pursuant to Order, if required, qualified as directed by law, and the Court having ordered that Letters of Administration be issued to you;*

*THESE ARE, THEREFORE, to authorize and empower you, the said **MACARENA CASTILLO,** to take into your possession and control all the goods, chattels, claims, and papers of the said estate, and to return a true and perfect inventory thereof to this Court; to collect and pay all debts, and to do and transact all the duties in relation to said estate, and to deliver the residue thereof to those who are by law entitled.*

*WITNESS, Richard R. Rooker, Clerk of the Probate Court, at office, this **November 27th, 2019** .*

RICHARD R. ROOKER, Clerk

_____ D.C.

STATE OF TENNESSEE)

DAVIDSON COUNTY)

I, RICHARD R. ROOKER, Clerk of the Probate Court, do hereby certify that the foregoing is a full, true and perfect copy of the Letters of Administration issued to **MACARENA CASTILLO** as **Administratrix** of the estate of **RODOLFO CASTILLO SR**, deceased, and I do further certify that **MACARENA CASTILLO** is still acting as Administrator of the estate, and all acts as such are entitled to full faith and credit as it appears from the official record in my office in Nashville, Tennessee, this the 27th day of November, 2019

RICHARD R. ROOKER, Clerk

_____ D.C.