THIS DOCUMENT PREPARED BY:

Barbara J. Moss
Elder Law of Nashville PLC
162 Woodmont Blvd
Nashville, TN 37205

OWNERS: Jesse Starr and Dana Gruebel
3519 Claridge Road
Jacksonville, FL 32250

Tax Parcel: 150 11 0 129.00

SEND TAX NOTICE TO: **Same**

AFFIDAVIT OF INHERITANCE

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

The undersigned, Joan Thomas, being duly sworn, deposes and says:

Charles J. "Jake" Starr, a resident of Davidson County, Tennessee, died on March 18, 2022 (death certificate attached). Charles J. "Jake" Starr died owning the following real estate:

Land in Davidson County, Tennessee, being Lot No. 288, on the Plan of Towne Village of the Country, Section 3, as shown on plat of record in Plat Book 5200, page 268 and 269, in the Register's Office for Davidson County, Tennessee, to which plat reference is hereby made for a more particular description.

This property is known as 3352 Towneship Road, Antioch, TN 37013.

Karen Johnson Davidson County
Batch# 861963 **AFFIDAVITH**
05/24/2022 12:32:22 PM 3 pgs
Fees: $17.00 Taxes: $0.00
20220524-0060167

At the time Charles J. "Jake" Starr died, he was not married and he had two children Jesse Starr and Dana Gruebel.

The undersigned, Joan Thomas, was the sister of Charles J. "Jake" Starr. I am 66 years of age and I knew the family all my life. I have no interest in the real property described above.

Signed this 18 day of May, 2022

Joan Thomas
Joan Thomas

STATE OF North Carolina
COUNTY OF Mecklenburg

BEFORE me, a Notary Public, duly appointed, commissioned and qualified in and for the State and County aforesaid, personally appeared Joan Thomas, with whom I am personally acquainted or proved to me on the basis of satisfactory evidence to be the person described in the foregoing, who signed the foregoing instrument in my presence, and who, upon oath, acknowledged that he executed the foregoing instrument for the purposes therein contained as his free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand affixed my seal at my office in said County, on this 18 day of May, 2022.

Kortney Roberts
Notary Public

My Commission Expires: 02/7/2027

KORTNEY ROBERTS
NOTARY PUBLIC
Mecklenburg County, North Carolina
My Commission Expires February 7, 2027

T.C.A. §67-4-409(a)(3)(D) exempts this instrument from tax and T.C.A. §67-4-409(a)(5) further provides the valuation oath is unnecessary, the affidavit being used to evidence transfer of title to the property to beneficiaries.

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2022 022572

1. Decedent's Legal Name: CHARLES JAGELS STARR		2. Sex: MALE	3. Date of Death: 03/18/2022
4. Time of Death (Approx.): 04:37	5a. Age: 68	6. Date of Birth: 08/12/1953	7. Birthplace: ATLANTA, GA
8a. Place of Death: HOSPICE FACILITY			
8b. Facility Name: ALIVE HOSPICE	8c. City or Town: NASHVILLE		8d. County of Death: DAVIDSON
9. Marital Status: DIVORCED	10. Surviving Spouse (name prior to first marriage)	11a. Decedent's Usual Occupation: SELF-EMPLOYED	11b. Kind of Business/Industry: PAINT
12. Social Security Number: -6987	13a. Residence-State or Foreign Country: TENNESSEE	13b. County: DAVIDSON	13c. City or Town: ANTIOCH
13d. Street and Number: 3352 TOWNESHIP RD	13e. Inside City Limits?: YES	13f. Zip Code: 37013	14. Was Decedent ever in US Armed Forces?: NO
15. Decedent's Education: HIGH SCHOOL GRADUATE OR GED COMPLETED	16. Decedent of Hispanic Origin?: NO, NOT SPANISH/HISPANIC/LATINO	17. Decedent's Race: WHITE	
18. Father's Name: JAMES STARR		19. Mother's Name Prior to First Marriage: NANCY JAGELS	
20a. Informant's Name: JESSE STARR	20b. Relationship to Decedent: SON	20c. Mailing Address: 3519 CLARIDGE RD. E. JACKSONVILLE, FL 32250	
21a. Method of Disposition: CREMATION	21b. Place of Disposition: MUSIC CITY CREMATION SERVICE	21c. Location: NASHVILLE, TN	
22a. Signature of Funeral Director: ▶ /e/ JONATHAN SCOTT KEENE	22b. License Number: 5939	22c. Signature of Embalmer: ▶	22d. License Number:
23a. Name and Address of Funeral Home: NASHVILLE CREMATION CENTER, 8120 SAWYER BROWN ROAD, #108, NASHVILLE, TN 37221			23b. License Number: 1319
24. Registrar's Signature: ▶ /e/ EDWARD G BISHOP III		25. Date Filed: 03/29/2022	

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.

27a. Certifier: ▶ /e/ LAURA THARPE	27b. License Number: 048448	27c. Date Signed: 03/28/2022
27d. Name and Address: LAURA THARPE 1718 PATTERSON STREET, NASHVILLE, TN 37203		

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). Sequentially list conditions, if any, leading to the cause listed on line a. Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST	a. ALCOHOLIC CIRRHOSIS	
	b.	
	c.	
	d.	

Part II. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN PART I: DEMENTIA

29a. Was an Autopsy Performed?: NO
29b. Were Autopsy Findings Available to Complete the Cause of Death?:

30. Manner of Death: NATURAL	31. Did Tobacco Use Contribute to Death?: NO	32. If Female: 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-1659E

RDA 10112

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.

14085822

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 4 0 8 5 8 2 2
Date Issued: Mar-30-2022

CERTIFICATION OF VITAL RECORD