Karen Johnson Davidson County
Batch# 997766 DEEDQC
05/01/2023 08 23 53 AM 3 pgs
Fees $17 00 Taxes $0 00
20230501-0031689

THIS INSTRUMENT PREPARED BY: **Martin Heller Potempa & Sheppard, PLLC** 1935 21st Avenue South, Suite 100 Nashville, Tennessee 37212 (615) 800-7096 *This Deed was prepared based on information provided by the parties and no independent title examination was prepared.*	STATE OF TENNESSEE COUNTY OF DAVIDSON The actual consideration for this transfer is: **$0.00**. AFFIANT Subscribed and sworn to before me, this 25 day of April, 2023. NOTARY PUBLIC My Commission Expires: 5/5/25

QUITCLAIM DEED

Address New Owner:	**Send Tax Bills To:**	**Map and Parcel No.:**
Edward D. Roberts, Trustee 7916 Old Harding Pike Nashville, Tennessee 37221	New Owner	Map 142-9-D Parcel 164

FOR AND IN CONSIDERATION of Zero and No/100ths Dollars ($0.00) and other good and valuable consideration, the receipt of all of which is hereby acknowledged, I, **EDWARD D. ROBERTS** ("Grantor"), do hereby quitclaim, transfer and convey unto **EDWARD D. ROBERTS, TRUSTEE OF THE EDWARD D. ROBERTS REVOCABLE TRUST, *as amended and restated on October 4, 2013*** ("Grantee"), its successors and assigns, all of my right, title and interest in certain real property in the County of Davidson, State of Tennessee, identified below.

This is improved property known as 8521 SAWYER BROWN, NASHVILLE, TENNESSEE 37221, and more particularly described as follows:

Unit No. 852, together with the carport designated No. 8521-C, in River Plantation, section Ten, Phase One, a Condominium, a Horizontal Property Regime, located on sawyer Brown Road, Bellevue, Davidson County, Tennessee, as shown on the plat of River Plantation, section Ten, Phase I, Condominium Apartments, recorded in Book 7900, 945, Register's Office for Davidson County, Tennessee, and described in a Master Deed recorded in Book 9394, page 598, said 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 apartments, property, co-owners and tenants of River Plantation, Section Ten, Phase One, Condominium Apartments, contained in the Master Deed and By-Laws appended thereto, recorded in Book 9394, page598, et. seq. and annexation document in Book 9669, page 111, Register's Office for Davidson County, Tennessee, are incorporated in this deed by reference and made a part hereof the same as though copied herein.

This conveyance is also subject to the Covenants, Conditions and Restrictions for the River Plantation Sections 8-11 Umbrella Association, Inc., of record in Book 7389, page 924, Plat in Book 7900, pages745, et. seq., as re-recorded in Book 7900. page 945 Register's office for said County.

Being the same property conveyed to Edward D. Roberts, Jr. and wife, Barbara T. Roberts by Warranty Deed from Haury and Smith Contractors, Inc., a Tennessee corporation, of record in Book 9799, Page 309, Register's Office for Davidson County, Tennessee. The said Barbara T. Roberts having since died on December 30, 2022, leaving Edward D. Roberts, Jr. as the surviving tenant. A copy of the death certificate for Barbara T. Roberts is attached hereto as **Exhibit A**.

This conveyance is subject to any and all existing easements and restrictions as shown of record.

IN WITNESS WHEREOF, Trustee has executed this instrument on this the 22 day of February 2023.

EDWARD D. ROBERTS

STATE OF TENNESSEE)
COUNTY OF DAVIDSON)

Personally appeared before me, the undersigned Notary Public, in and for the said county and state, the within named **Edward D. Roberts**, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that he executed the within instrument for the purposes therein contained.

Witness my hand and official seal at office, this 22 day of February 2023.

Notary Public
My Commission Expires: 5/5/25

EXHIBIT A

Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER 2022 086784

1. Decedent's Legal Name: BARBARA T ROBERTS		2. Sex: FEMALE	3. Date of Death: 12/30/2022
4. Time of Death (Approx.): 15:30	5a. Age: 83	6. Date of Birth: 02/24/1939	7. Birthplace: NASHVILLE, TN
8a. Place of Death: HOSPICE FACILITY			
8b. Facility Name: ALIVE HOSPICE	8c. City or Town: NASHVILLE		8d. County of Death: DAVIDSON
9. Marital Status: MARRIED	10. Surviving Spouse (name prior to first marriage): DAVE ROBERTS	11a. Decedent's Usual Occupation: LPN	11b. Kind of Business/Industry: VANDERBILT HOSPITAL
12. Social Security Number: XXX	13a. Residence-State or Foreign Country: TENNESSEE	13b. County: DAVIDSON	13c. City or Town: NASHVILLE
13d. Street and Number: 7916 OLD HARDING PIKE	13e. Inside City Limits?: YES	13f. Zip Code: 37221	14. Was Decedent ever in US Armed Forces?: NO
15. Decedent's Education: ASSOCIATE DEGREE	16. Decedent of Hispanic Origin?: NO, NOT SPANISH/HISPANIC/LATINO	17. Decedent's Race: WHITE	
18. Father's Name: DOYLE PATRICK THOMPSON		19. Mother's Name Prior to First Marriage: HALLIE MARIE SLOAN	
20a. Informant's Name: DAVE ROBERTS	20b. Relationship to Decedent: HUSBAND	20c. Mailing Address: 7916 OLD HARDING PIKE, NASHVILLE, TN 37221	
21a. Method of Disposition: BURIAL	21b. Place of Disposition: HARPETH HILLS MEMORY GARDENS	21c. Location: NASHVILLE TN	
22a. Signature of Funeral Director: ▶ /e/ MARIA ALEJANDRA FONSECA	22b. License Number: 20513	22c. Signature of Embalmer: ▶	22d. License Number
23a. Name and Address of Funeral Home: HARPETH HILLS MEMORY GARDENS, FUNERAL HOME AND CREMATION CENTER, 9090 HIGHWAY 100, NASHVILLE, TN 37221-			23b. License Number: 849
24. Registrar's Signature: ▶ /e/ EDWARD G BISHOP III		25. Date Filed: 01/05/2023	

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: 01/04/2023

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. XXXXXXXXXX	
	b. XXXXX	
	c.	
	d.	

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

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?: PROBABLY	32. If Female: NOT PREGNANT WITHIN PAST YEAR		
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

RH-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.

14655185

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

Edward G. Bishop III
State Registrar

Morgan McDonald, MD, FAAP, FACP
Commissioner

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Date Issued: Jan-06-2023