THIS INSTRUMENT PREPARED BY:	STATE OF Georgia COUNTY OF Gilmer
MARTIN HELLER POTEMPA & SHEPPARD, PLLC 2122 21st Avenue South Nashville, Tennessee 37212 (615) 800-7096	The actual consideration for this transfer is: $0.00. AFFIANT Subscribed and sworn to before me, this 23 day of October 2023. Patrick Widjaja NOTARY PUBLIC My Commission Expires: 9-1-26

Karen Johnson Davidson County
Batch# 1068593 AFFIDAVITH
11/06/2023 08:43:20 AM 3 pgs
Fees: $17.00 Taxes: $0.00

20231106-0086433

arch was not conducted in the ffidavit. All information was provided by the Affiant.

PATRICK WIDJAJA NOTARY PUBLIC MY COMMISSION EXPIRES SEPTEMBER 1, 20 FULTON COUNTY, GEORGIA

Address New Owner:	Send Tax Bills To:	Tax Information:
Doris & George Hess 5545 Rons Rd Merritt Island, FL 32953	New Owner	094 01 0453.00

AFFIDAVIT OF HEIRSHIP

1. My name is James P Thews ("Affiant"). I currently reside in Gilmer County, state of GA. I am an adult, and I am competent to give the testimony in this sworn Affidavit. My testimony herein is based upon my personal knowledge.

2. **Tamara H. Taylor** (hereinafter "Decedent") was my friends sister and I knew her for approximately 3 years.

3. Decedent died on August 11, 2023, as a resident of Davidson County, Tennessee. Her Death Certificate is attached hereto as **Exhibit 1**. To my knowledge, she died without a Last Will and Testament and her intestate estate is being administered under Docket No. 23P1816 in the Seventh Circuit Court for Davidson County, Tennessee.

4. At the time of her passing, Decedent owned real property located at **1609 ELECTRIC AVENUE, NASHVILLE, TENNESSEE 37206** (the "Property"). The Property is more fully and particularly described as follows:

Being Lot No. 73 of Shelby Village, Section 3, a plat of which is of record in Plat Book 2083, page 6, Register's Office for Davidson County, Tennessee, to which reference is hereby made for further description of said property.

Said Lot No. 73 fronts 48.7 feet on the northerly side of Electric Avenue and extends back 150 feet on the easterly line and 154.5 feet on the westerly line to a dead line, measuring 72 feet thereon.

Being the same property conveyed to Tamara Taylor, an unmarried woman, by Warranty Deed from Delta Four, LLC, a Tennessee limited liability company, of record in Instrument No. 20150428-0037885, Register's Office for Davidson County, Tennessee.

5. The Decedent was unmarried at the time of her death and she had no children, born-to or adopted by her, during her lifetime.

6. Decedent was survived by her parents, Doris and George Hess.

7. Therefore, Decedent's interest in the Property vested in fee simple absolute in Doris Hess and George Hess, her sole heirs-at-law, immediately upon her death, pursuant to T.C.A. §31-2-103. As of the filing of this Affidavit, ownership of the Property remains vested in fee simple in the names of **DORIS HESS AND GEORGE HESS, TENANTS IN COMMON.**

FURTHER AFFIANT SAYETH NOT.

SWORN this 23 day of October 2023.

James P. Thews, **Affiant**

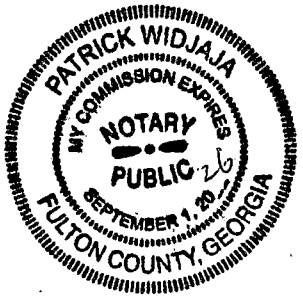
STATE OF Georgia)
COUNTY OF Gilmer)

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, James P. Thews, the within named Affiant, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who acknowledged that he/she executed the within instrument for the purposes therein contained.

Sworn to and subscribed before me, the undersigned Notary Public, this 23 day of October 2023.

Patrick Widjaja

NOTARY PUBLIC
My commission expires: 9-1-26



EXHIBIT

tabbies

1

STATE OF TENNESSEE
Office of Vital Records

TENNESSEE DEPARTMENT OF HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER 2023 050121

1. Decedent's Legal Name: TAMARA HESS TAYLOR			2. Sex: FEMALE	3. Date of Death: 08/11/2023
4. Time of Death (Approx.): 19:57	5a. Age: 58	6. Date of Birth: 04/12/1965	7. Birthplace: MANASSAS, VA	
8a. Place of Death: DECEDENT'S HOME		8c. City or Town: NASHVILLE		8d. County of Death: DAVIDSON
8b. Facility Name: 1609 ELECTRIC AVENUE	10. Surviving Spouse (name prior to first marriage)	11a. Decedent's Usual Occupation: PILOT		11b. Kind of Business/Industry: DELTA AIR LINES
9. Marital Status: DIVORCED		13b. County: DAVIDSON		13c. City or Town: NASHVILLE
12. Social Security Number: [redacted]	13a. Residence-State or Foreign Country: TENNESSEE	13e. Inside City Limits?: YES	13f. Zip Code: 37206	14. Was Decedent ever in US Armed Forces?: NO
13d. Street and Number: 1609 ELECTRIC AVENUE				
15. Decedent's Education: BACHELOR'S DEGREE	16. Decedent of Hispanic Origin?: NO, NOT SPANISH/HISPANIC/LATINO		17. Decedent's Race: WHITE	
18. Father's Name: GEORGE R HESS			19. Mother's Name Prior to First Marriage: DORIS DAVIS	
20a. Informant's Name: COLLEEN HESS TOKARZ	20b. Relationship to Decedent: SISTER	20c. Mailing Address: 1199 SETTLERS RIDGE ROAD, ELLIJAY, GA 30540		
21a. Method of Disposition: CREMATION		21b. Place of Disposition: MUSIC CITY CREMATORY SERVICES	21c. Location: NASHVILLE, TN	
22a. Signature of Funeral Director: ▶ /e/ BILLY ORANGE		22b. License Number: 5846	22c. Signature of Embalmer: ▶	22d. License Number:
23a. Name and Address of Funeral Home: COMPASSION FUNERAL & CREMATION SERVICES, 6949 CHARLOTTE PIKE, STE 104, NASHVILLE, TN 37209				23b. License Number: 1436
24. Registrar's Signature: ▶ /e/ EDWARD G BISHOP III			25. Date Filed: 08/21/2023	

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/ EMILY DENNISON, M.D.	27b. License Number: 53219	27c. Date Signed: 08/21/2023

27d. Name and Address: EMILY DENNISON, M.D. 850 R.S. GASS BLVD, NASHVILLE, TN 37216

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. PENDING	
	b.	
	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?

29b. Were Autopsy Findings Available to Complete the Cause of Death?

30. Manner of Death: PENDING	31. Did Tobacco Use Contribute to Death?	32. If Female:	
33. If Transportation Injury, Specify:	34a. Date of Injury	34b. Time of Injury	34c. Injury at Work?
	34e. Describe How Injury Occurred		34d. Place of Injury / 34f. Location of Injury

PH-1659E

RDA 10112

15374075

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 H Bishop III
Edward G. Bishop III
State Registrar

Ralph Alvarado, MD, FACP
Commissioner

Date Issued: Sep-07-2023

CERTIFICATION OF VITAL RECORD