This document prepared by:

Name:	Karoline Hallig
Firm/Company:	EQUITY SETTLEMENT SERVICES, INC.
Address:	444 ROUTE 111
Address 2:	
City, State, Zip:	SMITHTOWN, N.Y. 11787
Phone:	631-715-3445

Karen Johnson Davidson County
Batch# 1167464 DEEDQC
08/12/2024 01:55:30 PM 5 pgs
Fees: $27.00 Taxes: $0.00
20240812-0060559

--------Above This Line Reserved For Official Use Only----------

(and after recording return to):

59-12436

QUIT CLAIM DEED

KNOW ALL MEN BY THESE PRESENTS THAT:

FOR VALUABLE CONSIDERATION OF TEN DOLLARS ($10.00), and other good and valuable consideration, cash in hand paid, the receipt and sufficiency of which is hereby acknowledged, **BARBARA A. MOORE, a married person**, Whose address is 1479 County Hospital Road, Nashville TN 37218, hereinafter referred to as "Grantor", does hereby grant with quitclaim covenants **To BARBARA A. MOORE, a single person,** Whose address is 1479 County Hospital Road, Nashville TN 37218, hereinafter referred to as "Grantee", the following lands and property, together with all improvements located thereon, lying in the County of Davidson, City of Williamson, State of TENNESSEE.

"SEE DESCRIPTION ATTACHED"

****The purpose of this deed is to correct marital status****

LESS AND EXCEPT all oil, gas and minerals, on and under the above described property owned by Grantor, if any, which are reserved by Grantor.

SUBJECT to all easements, rights-of-way. protective covenants and mineral reservations of record, if any.

AND BEING THE SAME premises conveyed to Grantor by Deed from dated 08/25/2005 and recorded 08/31/2005 in Instrument Number 20050831-0104182 of the Davidson County records

TO HAVE AND TO HOLD same unto Grantee, and unto Grantee's heirs and assigns forever, with all appurtenances thereunto belonging.

Taxes for tax year 2024 shall be ☐ prorated between Grantor and Grantee as of the date selected by Grantor and Grantee, or ☐ paid by Grantee, or ☐ paid by Grantor.

The property herein conveyed ☐ is not a part of the homestead of Grantor, or ☐ is part of the homestead of Grantor and if Grantor is married, the conveyance is joined by both Husband and Wife.

I, or we, hereby swear or affirm that to the best of affiant's knowledge, information, and belief, the actual consideration for this transfer is $10.00.

WITNESS Grantor(s) hand(s) this the 26th day of July, 2024.

Barbara A. Moore
BARBARA A. MOORE

STATE OF TENNESSEE
COUNTY OF DAVIDSON

On this the 26 day of 07, 2024, before me, CLINTON BRYANT (Name of Notary), the undersigned officer, personally appeared BARBARA A. MOORE (Name of individual or individuals), known to me (or satisfactorily proven) to be the person(s) whose name(s) (is or are) subscribed to the within instrument and acknowledged that (he, she or they) executed the same for the purposes therein contained.

In witness whereof I hereunto set my hand.

Date: 07-26-2024

Clinton Bryant
(Signature of Notary Public)

My Commission Expires: 03-03-2025

CLINTON BRYANT
TENNESSEE
NOTARY
PUBLIC
My Comm Exp.
03/03/2025
COUNTY OF DAVIDSON

STATE OF TENNESSEE
COUNTY OF Davidson

I, or we, hereby swear or affirm that the actual consideration for this transfer or value of the property or interest in property transferred, whichever is greater, is $10.00, which amount is equal to or greater than the amount the property or interest in property transferred would command at a fair and voluntary sale.

Barbara A. Moore
Affiant

Subscribed and sworn to before me this 26 Day of 07, 2024.

Clinton Bryant
Notary

CLINTON BRYANT
TENNESSEE
NOTARY
PUBLIC
My Comm Exp.
03/03/2025
COUNTY OF DAVIDSON

SEND TAX STATEMENTS TO:
BARBARA A. MOORE,
Whose address is 1479 COUNTY HOSPITAL RD, NASHVILLE, TN 37218

EXHIBIT "A"

59-00123110

A certain tract or parcel of land in Davidson County, State of Tennessee, described as follows to wit:

Being Lot No. 486 on the plan of Bordeaux Hills, Section Five, as of record in Book 3500, Page 114, Register's Office for Davidson County, Tennessee.

Said Lot No. 486 fronts 55.0 feet on the northwesterly side of County Hospital Road, and runs back between lines 167.2 feet on the southwesterly line and 112.1 feet on the northeasterly line to a line in the rear on which it measures 78.14 feet.

Parcel Id #: 080 08 0 408.00

For information only: 1479 COUNTY HOSPITAL RD, NASHVILLE, TN 37218-3006.

Tennessee Certification of Electronic Document

I, Alita Russell, do hereby make oath that I am a licensed attorney and/or the custodian of the original version of the electronic document tendered for registration herewith and that this electronic document is a true and exact copy of the original document executed and authenticated according to law on 07/26/24 (date of document).

Affiant Signature

08/07/24
Date

State of New York

County of Suffolk

Sworn to and subscribed before me this 7 day of August, 2024.

Notary's Signature

MY COMMISSION EXPIRES: _____

NOTARY'S SEAL

KATHERINE ALFARO
Notary Public - State of New York
No. 01AL0007466
Qualified in Suffolk County
My Commission Expires 05/12/2027