Karen Johnson Davidson County
Batch # 1231197 DEEDQC
01/29/2025 08 21 15 AM 3 pgs
Fees $17 00 Taxes $0 00
20250129-0006713

PREPARED BY AND RETURN TO:
Bryan D. Spicer
Attorney at Law
342 Cool Springs Blvd., Suite 202
Franklin, TN 37067
File No. 28253

This instrument was drafted from information furnished by the parties. No representation or warranty is made by the preparer as to the accuracy of anything set forth herein. The parties have waived performance of a title search, title opinion letter or title insurance by the preparing attorney.

Preparer is not a closing agent pursuant to Section 6045 of the Internal Revenue Code as amended by the Tax Reform Act.

PONDA CULBERSON · STATE OF TENNESSEE · NOTARY PUBLIC · WILLIAMSON COUNTY · My Commission Expires 02-28-2027

STATE OF TENNESSEE
COUNTY OF WILLIAMSON

The actual consideration is $0 00

Affiant: _____

Subscribed and sworn before me, this the 24th day of January, 2025.

Notary Public: _____
My Commission Expires: _____

Address of New Owner:
Valentina Buynovskaya
810 Bellevue Road, Apt 190
Nashville, TN 37221

Send Tax Bills To:
Same as New Owner

MAP/PARCEL:
142-6A-190

QUITCLAIM DEED

For and in consideration of One Dollar (1 00), cash in hand paid, the receipt of which is hereby acknowledged, **Valentina Buynovskiy AKA Valentina Buynovskaya** (hereinafter referred to as **"GRANTOR"**) does quitclaim and convey all of her undivided right, title and interest to the hereinafter described property to **Valentina Buynovskaya and Olga A. Lane, tenants in common, with right of survivorship,** (hereinafter referred to as **"GRANTEES"**) their Heirs and Assigns, in and to the following described tract of land·

A Condominium Apartment in Davidson County, Being Unit No. 190, Building No. 25 of Peppertree Creekside Meadows Condominiums horizontal property regime pursuant to the Tennessee Horizontal Property Act, as shown of record in Book 4675, Pages 128-130 Register's Office for said County, to which source reference is hereby made for more complete details of description, together with the said Apartment's appurtenant undivided interest in the general and limited common elements of the condominium, together with the garage designated as No 190G.

Being the same property conveyed to Anatoliy Buynovskiy and wife, Valentina Buynovskiy by Warranty Deed from Solid Ground LLC, a Tennessee limited liability company, dated September 30, 2005, of record in Instrument No 20051101-0131821. Anatoliy Buynovskiy having since died on November 19, 2024. See Exhibit A.

This is improved property located at **810 Bellevue Road, Apt. 190 Nashville, TN 37221.**

Whenever used, the singular number shall include the plural, the plural the singular, and the use of any gender shall be applicable to all genders Said property is conveyed subject to such limitations, restrictions, easements and encumbrances as may affect the premises.

IN WITNESS WHEREOF, this document was executed this 24th day of January, 2025.

Valentina Buynovskiy AKA Valentina Buynovskaya

STATE OF TENNESSEE
COUNTY OF Williamson

Personally appeared before me, the undersigned, a Notary Public in and for said County and State, the within named Valentina Buynovskiy AKA Valentina Buynovskaya, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence) and who acknowledged that she executed this instrument for the purposes contained therein

Witness my hand and official seal at Franklin (city), Tennessee, this 24th day of January, 2025.

PONDA CULBERSON
STATE OF TENNESSEE
NOTARY PUBLIC
WILLIAMSON COUNTY
My Commission Expires 02-28-2027

Notary Public

My Commission Expires:

STATE OF TENNESSEE

CERTIFICATION OF VITAL RECORD

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER 2024 072227

1 Decedent's Legal Name: ANATOLIY VLASOVICH BUYNOVSKIY			2 Sex: MALE	3 Date of Death: 11/19/2024
4 Time of Death (Approx.): 14 57	5a Age: 68	6 Date of Birth: 03/08/1956	7 Birthplace: UKRAINE	
8a Place of Death: INPATIENT		8c. City or Town: NASHVILLE		8d County of Death: DAVIDSON
8b Facility Name: SAINT THOMAS WEST HOSPITAL			11a. Decedent's Usual Occupation: DISTRIBUTION	11b Kind of Business/Industry: DAIRY INDUSTRY
9 Marital Status: MARRIED	10 Surviving Spouse (name prior to first marriage): VALENTINA NIKOLAEVNA KHRAPONOVA		12b County: DAVIDSON	13c City or Town: NASHVILLE
12. Social Security Number: [redacted]	13a Residence-State or Foreign Country: TENNESSEE			14 Was Decedent ever in US Armed Forces?: NO
13d Street and Number: 810 BELLEVUE RD APT 190		13e Inside City Limits?: YES	13f. Zip Code: 37221	
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: VLAS NIKOLAEVICH BUYNOVSKIY			19 Mother's Name Prior to First Marriage: TATIANA PETROVNA FEDAYNINA	
20a Informant's Name: VALENTINA BUYNOVSKAYA	20b Relationship to Decedent: WIFE	20c. Mailing Address: 810 BELLEVUE RD APT 190, 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: ▶ /s/ EMILY ANN HAAG	22b License Number: 20367	22c. Signature of Embalmer: ▶ /s/ JACOB BINH MORRIS		22d. License Number: 20189
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: 11/26/2024	

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/ IMRAN HUDA	27b. License Number: 57277	27c Date Signed: 11/25/2024
27d. Name and Address: IMRAN HUDA 4220 HARDING RD, STE 500, NASHVILLE, TN 37205		

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. INTRACEREBRAL HEMORRHAGE	
	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?: 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 certify that this is a true and correct representation of the original certificate on file with the Tennessee Office of Vital Records This copy is not valid unless prepared on security paper displaying the state seal and signature of the State Registrar.

Edward G. Bishop III
State Registrar

Ralph Alvarado, MD, FACP
Commissioner

Date Issued: Nov-26-2024

0 1 6 7 3 0 5 6 1

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE