QUITCLAIM DEED

Karen Johnson
Batch # 1339464
10/29/2025 02:48:37 PM
Fees: $17.00 Taxes: $0.00
Davidson County
DEEDQC
3 pgs
20251029-0086183

This Instrument Was Prepared By:
David L. King, Attorney
Tennessee Law Group, Inc.
1300 Division Street, Ste 102
Nashville, Tennessee 37203

Based on Information provided by the Register's Office for Davidson County, Tennessee

Address New Owner:	**Send Tax Bills to Mortgagee:**	**Map and Parcel ID:**
Crockett Family Revocable Living Trust 764 Howse Avenue Madison, TN 37115	Owner	42-11B-102

KNOW ALL PERSONS BY THESE PRESENTS that Marilyn Crockett, Widow of Joe Leslie Crockett (Deceased – Death Certificate Attached), hereinafter called the Sole Grantor, for and in consideration of the sum of zero dollars, has bargained and hereby remises, releases and forever quitclaims her interest in whatever right, title and interest in and to the following described property to the **Crockett Family Revocable Living Trust**, hereinafter called the grantee, its heirs and assigns, the property being a certain tract or parcel of land in Davidson County, State of Tennessee, described as follows:

Being Apartment Unit 198 of Heritage Village Condominiums created under Title 66, Section 27-101, et seq. as amended, Tennessee Code Annotated, and as established by a Master Deed of record in Book 4758, Page 179, and amended in Book 4808, Page 829, Book 5102 Page 383, and Book 6380, Page 989 and further supplemented and amended by instrument of record in Book 6484, Page 287, Register's Office for Davidson County, Tennessee, together with the undivided percentage interest in the Common Elements appurtenant to said Unit as set forth said Master Deed as supplemented and amened. Reference is hereby made to the plat of Heritage Village Condominiums set forth as Exhibit "A" of said Supplement and Amendment to the Master Deed, for a more complete identification and description of such Unit.

Being the same property conveyed to Sarah M. Mayo by deeds of record in Book 11009, Page 231, Register's Office for Davidson County, Tennessee.

Being the same property conveyed unto Joe L. Crockett and Marilyn Crockett, Husband and Wife, by Executor's Quitclaim Deed from the Estate of Sarah M. Mayo, dated September 14, 2011, of record in the Register's Office for Davidson County, Tennessee, Instrument Number 20110914-0071354, three pages which includes Letters Testamentary attached to same as entered by the Davidson County Probate Clerk.

THIS CONVEYANCE IS SUBJECT TO ALL EASEMENTS, COVENANTS, CONDITIONS, RESERVATIONS, LEASES AND RESTRICTIONS OF RECORD, ALL LEGAL HIGHWAYS, ALL RIGHTS OF WAY, ALL ZONING, BUILDING AND OTHER LAWS, ORDINANCES AND REGULATIONS, ALL RIGHTS OF TENANTS IN POSSESSION, AND ALL REAL ESTATE TAXES AND ASSESSMENTS NOT YET DUE AND PAYABLE.

This conveyance is further made subject to real property taxes for 2025 and subsequent years.

This is improved property known as
198 Heritage Trace Drive, Madison, Tennessee 37115

TO HAVE AND TO HOLD the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said GRANTEE, its heirs and assigns, forever; and GRANTOR does covenant with the said GRANTEE that she is lawfully seized and possessed of said land in fee simple, has a good right to convey it, and the same is unencumbered, unless otherwise herein set out; and, GRANTOR does further covenant and bind herself, her heirs and assigns, against the lawful claims of all persons whomsoever. Wherever used, the singular number shall include the plural, the plural the singular, and the use of any gender shall be applicable to all genders. M C.

In witness whereof, Marilyn Crockett has signed and executed this quitclaim deed on this day of August 10 2025:

Marilyn Crockett

Marilyn Crockett

STATE OF TENNESSEE
COUNTY OF DAVIDSON

Personally appeared before me, Mitzi L. Dorris, a Notary Public in and for said County and State, the within named Marilyn Crockett with whom I am personally acquainted, (or proved to me on the basis of satisfactory evidence) and who acknowledge that she executed the within instrument for the purposes therein contained.

Witness my hand and official seal at Davidson County, Tennessee, this 10th day of August, 2025.

NOTARY PUBLIC

My Commission Expires:

MITZI L. DORRIS
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY
MY COMMISSION EXPIRES 5-3-2027

STATE OF TENNESSEE

CERTIFICATION OF VITAL RECORD

void void void

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER: 2024 055202

1. Decedent's Legal Name		2. Sex	3. Date of Death
JOE LESLIE CROCKETT		MALE	09/05/2024
4. Time of Death (Approx.)	**5a. Age**	**6. Date of Birth**	**7. Birthplace**
23:43	81	12/12/1942	NASHVILLE, TN
8a. Place of Death			
ER/OUTPATIENT			
8b. Facility Name	**8c. City or Town**		**8d. County of Death**
TRISTAR SKYLINE MEDICAL CENTER	NASHVILLE		DAVIDSON
9. Marital Status	**10. Surviving Spouse (name prior to first marriage)**	**11a. Decedent's Usual Occupation**	**11b. Kind of Business/Industry**
MARRIED	MARILYN MAYO	MIDDLE SCHOOL TEACHER	EDUCATION
12. Social Security Number	**13a. Residence-State or Foreign Country**	**13b. County**	**13c. City or Town**
1848	TENNESSEE	DAVIDSON	MADISON
13d. Street and Number	**13e. Inside City Limits?**	**13f. Zip Code**	**14. Was Decedent ever in US Armed Forces?**
764 HOWSE AVE	YES	37115	NO
15. Decedent's Education	**16. Decedent of Hispanic Origin?**	**17. Decedent's Race**	
MASTER'S DEGREE	NO, NOT SPANISH/HISPANIC/LATINO	WHITE	
18. Father's Name		**19. Mother's Name Prior to First Marriage**	
JACK BOYD CROCKETT SR		SARAH PAULINE COOP	
20a. Informant's Name	**20b. Relationship to Decedent**	**20c. Mailing Address**	
MARILYN M. CROCKETT	SPOUSE	764 HOWSE AVE, MADISON, TN 37115	
21a. Method of Disposition	**21b. Place of Disposition**	**21c. Location**	
CREMATION	MUSIC CITY CREMATORY SERVICE	NASHVILLE, TN	
22a. Signature of Funeral Director	**22b. License Number**	**22c. Signature of Embalmer**	**22d. License Number**
▶ /e/ MELINDA E CRAWFORD	5229	▶	
23a. Name and Address of Funeral Home			**23b. License Number**
SPRING HILL FUNERAL HOME AND CEMETERY, 5110 GALLATIN PIKE, NASHVILLE, TN 37216			1046
24. Registrar's Signature		**25. Date Filed**	
▶ /e/ EDWARD G BISHOP III		09/10/2024	

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	27b. License Number	27c. Date Signed
▶ /e/ MARSHALL HALL	48422	09/09/2024

27d. Name and Address

MARSHALL HALL 3441 DICKERSON PIKE, NASHVILLE, TN 37207

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. MYOCARDIAL INFARCTION	1 HOUR
	b. HYPERTENSION	YEARS
	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	31. Did Tobacco Use Contribute to Death?	32. If Female:
NATURAL	UNKNOWN	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.

Date Issued: Sep-10-2024

Edward G. Bishop III
State Registrar

Ralph Alvarado, MD, FACP
Commissioner

016520445

THE GREAT SEAL OF THE STATE OF TENNESSEE XVI AGRICULTURE COMMERCE 1796

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE