#18192

Advantage Title And Escrow, Inc.
1321 Murfreesboro Pike, Suite 823
Nashville TN 37217

WARRANTY DEED

Karen Johnson
Batch # 1461962
08/19/2026 12:59:22 PM
Fees: $18.00 Taxes: $851.00

20260819-0077206

Davidson County
DEEDWARR
3 pgs

LATRECE MCADOO
STATE OF TENNESSEE NOTARY PUBLIC
DAVIDSON COUNTY

State of Tennessee
County of Davidson

THE ACTUAL CONSIDERATION OR VALUE, WHICHEVER IS GREATER, FOR THIS TRANSFER IS $230,000.00

Affiant

SUBSCRIBED AND SWORN TO BEFORE ME, THIS THE 18th day of August, 2026

Notary Public

MY COMMISSION EXPIRES: 7/14/30

(AFFIX SEAL)

THIS INSTRUMENT WAS PREPARED BY
Advantage Title & Escrow, 1321 Murfreesboro Pike, Suite 823, Nashville, TN 37217

ADDRESS NEW OWNER(S) AS FOLLOWS:	SEND TAX BILLS TO:	MAP PARCEL NUMBERS
Blu Taco Belle, LLC, a Tennessee Limited Liability Company	new owner	053-06-0A-116.00
(NAME)	(NAME)	
1598 Guill Road		
(ADDRESS)	(ADDRESS)	
Mt. Juliet, TN 37122		
(CITY) (STATE) (ZIP)	(CITY) (STATE) (ZIP)	

For and in consideration of the sum of Ten Dollars ($10.00), cash in hand paid by the hereinafter named GRANTEES, and other good and valuable considerations, the receipt of which is hereby acknowledged, I, **Robert F. Brunton,** unmarried, hereinafter called the GRANTORS, have bargained and sold, and by these presents do transfer and convey unto **Blu Taco Belle, LLC, a Tennessee Limited Liability Company,** hereinafter called the GRANTEES, their heirs and assigns, a certain tract or parcel of land in Davidson County, State of Tennessee, described as follows, to-wit:

Land in Davidson County, Tennessee, being Lot No. 116, on the plan of Phase 3, Waterford, of record in Book 7900, Page 707, Register's office for said County, to which plan reference is hereby made for a more complete description.

Being the same property conveyed to Robert F. Brunton and Shirley A. Brunton, husband and wife, by deed of record in Instrument No. 20150709-0066891, Register's Office for Davidson County, Tennessee. Shirley A. Brunton having since died. See Exhibit "A"

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

unimproved ☐

This is improved ☑ property, known as 1940 Waterford Drive, Old Hickory, TN 37138
(House Number) (Street) (P.O. Address) (City or Town) (Postal Zip)

TO HAVE AND TO HOLD the said tract or parcel of land, with the appurtenances, estate, title and interest thereto belonging to the said GRANTEES, their heirs and assigns forever; and we do covenant with the said GRANTEES that we are lawfully seized and possessed of said land in fee simple, have a good right to convey it and the same is unencumbered, unless otherwise herein set out; and we do further covenant and bind ourselves, our heirs and representatives, to warrant and forever defend the title to the said land to the said GRANTEES, their 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.

Witness my/our hands this 18th day of August, 2026.

Robert F. Brunton

State of Tennessee
County of Wilson

Personally appeared before me Robert F. Brunton, with whom I am personally acquainted, and who acknowledged that he executed the foregoing instrument for purposes therein contained.

WITNESS my hand and seal this 18th day of August, 2026.

Notary Public
My Commission Expires
11/20/2029
File No.: 18192

VICTOR HAZELWOOD
STATE OF TENNESSEE NOTARY PUBLIC
SUMNER COUNTY

TENNESSEE

CERTIFICATION OF VITAL RECORD

Exhibit A

TENNESSEE DEPARTMENT OF HEALTH

CERTIFICATE OF DEATH

STATE FILE NUMBER 2025 001806

1. Decedent's Legal Name: SHIRLEY ANN BRUNTON			2. Sex: FEMALE	3. Date of Death: 01/03/2025
4. Time of Death (Approx.): 16:03	5a. Age: 74	6. Date of Birth: 02/25/1950	7. Birthplace: OKLAHOMA CITY, OK	
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): ROBERT BRUNTON	11a. Decedent's Usual Occupation: HOMEMAKER		11b. Kind of Business/Industry: HER OWN HOME
12. Social Security Number: [redacted]	13a. Residence-State or Foreign Country: TENNESSEE	13b. County: DAVIDSON		13c. City or Town: OLD HICKORY
13d. Street and Number: 1940 WATERFORD DR		13e. Inside City Limits?: YES	13f. Zip Code: 37138	14. Was Decedent ever in US Armed Forces?: NO
15. Decedent's Education: 8TH GRADE OR LESS	16. Decedent of Hispanic Origin?: NO, NOT SPANISH/HISPANIC/LATINO		17. Decedent's Race: WHITE	
18. Father's Name: RALPH WAYNE EDWARDS			19. Mother's Name Prior to First Marriage: BERELENE RUBY PHIPPS	
20a. Informant's Name: SHEENA A LAZENBY	20b. Relationship to Decedent: DAUGHTER	20c. Mailing Address: 1041 HOLLAND RIDGE WAY, LEBANON, TN 37090		
21a. Method of Disposition: CREMATION	21b. Place of Disposition: HENDERSONVILLE CREMATION CENTER		21c. Location: HENDERSONVILLE, TN	
22a. Signature of Funeral Director: ▶ /e/ JONATHAN SCOTT KEENE	22b. License Number: 5939	22c. Signature of Embalmer: ▶		22d. License Number
23a. Name and Address of Funeral Home: CREMATESIMPLY, 4962 LEBANON ROAD, OLD HICKORY, TN 37138				23b. License Number: 1355
24. Registrar's Signature: ▶ /e/ EDWARD G BISHOP III			25. Date Filed: 01/15/2025	

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/ MARY-ELLEN EDMISTON	27b. License Number: 5916	27c. Date Signed: 01/14/2025
27d. Name and Address: MARY-ELLEN EDMISTON 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.

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		Approximate Interval: Onset to Death
	a. LIVER CIRRHOSIS WITH ASCITES	UNKNOWN
	b. DIABETES TYPE 2 WITH CHRONIC KIDNEY DISEASE	UNKNOWN
	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?: UNKNOWN	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

RDA 10112

PH-1659E

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: Jan-16-2025

Edward G. Bishop III
State Registrar

Ralph Alvarado, MD, FACP
Commissioner

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

FRAUD OR TREASURE VOIDS THIS CERTIFICATE