

STATE OF ALABAMA)
COUNTY OF SHELBY)

Inst # 2000-31370

DEVOLUTION AFFIDAVIT

COMES NOW **Cecil Rudolph Falkner, also known as Cecil Rudolph Falkner, Jr.**, of 445 Highway 22, Montevallo, Alabama 35115, for the purpose of recognizing Devolution from Audrey Paul Byram, to Pearl Maxine Byram, and after having been duly sworn, said Affiant does hereby depose and say as follows:

1. Said Affiant is over the age of twenty-one (21) years, of sound mind, and has personal knowledge of the facts stated herein.
2. Affiant would state that on or about the 12th day of May, 1992, Aubrey Paul Byram, also known as Paul Byram, hereinafter designated as “decedent”, executed his Last Will and Testament (the original of same being attached hereto as **Exhibit “A”**), which Will devises all his right, title and interest in any and all real estate, in which said decedent maintained an interest, unto said decedent’s wife, to-wit, Pearl Maxine Byram.
3. Said Aubrey Paul Byram deceased testate while residing in Shelby County, Alabama, on or about the 5th day of April, 1995. (A copy of the death certificate of said decedent is hereto attached as **Exhibit “B”**).
4. Said decedent’s Will, hereto attached, was never probated, and no such probate is anticipated, as it is the same that the statutory period for such probate to occur has run. Also, it should be noted that your Affiant was designated as the Personal Representative under the terms of the Last Will and Testament of said decedent.
5. At the time of said decedent’s death, he owned an undivided one-half interest in certain real estate, with Pearl Maxine Byram, located in Shelby County, Alabama, hereinafter described as follows:

Commence at the SW corner of the SE ¼ of the SE ¼, Section 34, Township 20 South, Range 3 West, and run thence easterly along the South line of said ¼ - ¼ Section 457.94 feet to the point of beginning; thence continue along last described course 125 feet; thence turn a deflection angle 90 deg. 44’ 54” to the left and run northerly 144.5 feet as measured to an existing old metal corner; thence turn 89 deg. 21’ 53” to the left and run westerly 124.62 feet to an existing old metal corner; thence turn 90 deg. 29’ 12” to the left and run southerly 144.25 feet to the point of beginning, containing 0.414 acres, more or less, and subject to any and all easements, agreements and/or restrictions of probated record or applicable law. All according to a survey of Joseph E. Conn, Jr., Ala PLS #9049, dated May 1, 1992.
As per the Deed recorded at Instrument Number 1997-12376, dated April 21, 1997.

6. Pursuant to Alabama Code Section 43-2-830 (Alabama's Devolution Statute), said Pearl Maxine Byram became the owner and possessor of all right, title and interest in and to said real estate.
7. At the time of decedent's decease, said decedent was survived by his spouse, Pearl Maxine Byram, who subsequently deceased testate on or about the 11th day of January, 19 97, and her Will was probated in the Probate Court of Shelby County, Alabama, pursuant to Case Number 35-291.
8. Decedent was further survived by a son, to-wit, Robert Byram, who subsequently deceased (date of decease unknown), leaving a daughter, to-wit, Linda Brackmon, over the age of nineteen (19) years, whose address is 1070 Teery Road, Kingston Springs, Tennessee 37082. Furthermore, the decedent, Aubrey Paul Byram, was also survived by a daughter, to-wit, Joyce Jenkins, who is over the age of nineteen (19) years, and whose address or whereabouts are unknown to this Affiant.
9. Other than those individuals named in the preceding paragraph, the decedent, Aubrey Paul Byram, was not survived by any other heirs, or next-of-kin, to Affiant's knowledge. Furthermore, Affiant is unaware of the states of mind of the above-designated living survivors.
10. All debts and charges against the estate of the decedent, Aubrey Paul Byram, have been paid and satisfied.

FURTHERMORE, the Affiant saith naught.


Cecil Rudolph Falkner, Affiant

STATE OF ALABAMA)
COUNTY OF SHELBY)

Sworn to and subscribed before me this the 11th day of August, 2000.



Notary Public
My commission expires: 9/13/2001

EXHIBIT "A"

LAST WILL AND TESTAMENT OF

AUBREY PAUL BYRAM

I, Aubrey Paul Byram, social security number [REDACTED] of 1 Dunaway Drive, Calera, AL 35040, declare this to be my last will and testament, revoking all others heretofore made by me.

I

I decline to exercise any powers of appointment I may have. In the event any part of this will is found to be in violation of the Rule Against Perpetuities or other provision of law, said part shall not be stricken or nullified, but is hereby amended to conform to the minimum requirements of the law.

II

If after my death a signed list of some of my personal effects, bric-a-brac, heirlooms, and household items is found, indicating who should receive such sentimental items, I hereby direct my personal representative, including any successors, to distribute such items in accordance with such list.

III

I give all the rest and residue of my property to my wife Pearl Maxine Byram, should she survive me by three months. If she does not so survive me, I give one thousand dollars (\$1000) to my stepson Jimmy Jerome Falkner; my interest in property located on 13th Street SW, Alabaster, AL

**LAST WILL AND TESTAMENT
OF AUBREY PAUL BYRAM**

35007 to my stepson Cecil Rudolph Falkner, Jr; and my interest in property on Horton Street, Columbiana, AL 35007 and 18th Street at 21st Avenue, Calera, Al 35040 to my stepson Ronald Herbert Falkner. I give all the rest and residue of my property to Cecil Rudolph Falkner, Jr, and Ronald Herbert Falkner, equally, with right of representation per stirpes.

IV

If anyone inheriting under this will has not at that time attained the age of nineteen (19) years, then I hereby nominate and appoint my personal representative as Testamentary Guardian over the person and Trustee over the properties of said inheritor. The Testamentary Guardianship shall be subject to the rights of any surviving parent of said inheritor, and shall end when the inheritor attains legal majority, but the Testamentary Trust shall continue until ended as hereinafter set out.

I hereby vest in the Testamentary Guardian and Trustee, and any successors, full power and authority to use any and all of the properties inherited as they in their discretion may deem necessary and proper for the education, support, maintenance, or health of the inheritors, or for their reasonable support and comfort; or to enable them to maintain their accustomed standard of living; or to meet an emergency. I hereby expressly relieve the Testamentary Guardian and Trustee, and successors, from filing an inventory, or making any report or final settlement, or giving bond for any court, heir, or person, and I hereby ratify and confirm whatever they may do as they deem proper for the best interests of the inheritors. I hereby direct and desire that the said Testamentary Guardian and Trustee pay over and deliver to each inheritor, free of trust, one half the balance of that child's inheritance when the child attains the age of twenty-five (25) years, and


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OF AUBREY PAUL BYRAM**

the remainder when the child attains the age of thirty (30); and upon such final payment by Guardian and Trustee to child, the Guardian and Trustee shall thereby be fully discharged as to that child, and shall be relieved from further responsibility as to that child.

V

I hereby nominate and appoint my wife Pearl Maxine Byram to be my personal representative under this Will. If for any reason my wife shall fail to qualify or serve as personal representative, I nominate and appoint as successor my stepson Cecil Rudolph Falkner, Jr. My personal representative, or any successors, shall possess full powers to implement this will, including the power to sell any property whose disposition is not otherwise directed herein, and shall be exempt from filing an inventory, or making any report or final settlement, or giving bond for any court, heir, or person. I direct that my estate be settled without the intervention of any court, except to the extent required by law.

I, Aubrey Paul Byram, the testator, sign my name to this instrument consisting of this and two preceding and one succeeding pages this 12 May 1992, and being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as my last will and that I sign it willingly (or willingly direct another to sign for me), that I execute it as my free and voluntary act for the purposes therein expressed, and that I am nineteen years of age or older, of sound mind, and under no constraint or undue influence.


Aubrey Paul Byram
Testator

**LAST WILL AND TESTAMENT
OF AUBREY PAUL BYRAM**

We, E Faye Cecil, Steven R Sears, and Clay Gaines, the witnesses, sign our names to this instrument, being first duly sworn, and do hereby declare to the undersigned authority that the testator signs and executes this instrument as his last will and that he signs it willingly (or willingly directs another to sign for him), and that each of us, in the presence and hearing of the testator, hereby signs this will as witness to the testator's signing, and that to the best of our knowledge the testator is nineteen years of age or older, of sound mind, and under no constraint or undue influence.

E Faye Cecil, residing at 655 Main
E Faye Cecil Montevallo, AL 35115

Steven R Sears, residing at 655 Main
Steven R Sears Montevallo, AL 35115

Clay Gaines, residing at 665 Main
Clay Gaines Montevallo, AL 35115

Subscribed, sworn to, and acknowledged before me by Aubrey Paul Byram the testator and subscribed and sworn to before me by E Faye Cecil, Steven R Sears, and Clay Gaines, the witnesses, who were all known to me, on the date last above written.

Edna Faye Cecil
Notary public

MY COMMISSION EXPIRES OCTOBER 3, 1995

EXHIBIT "B"

This is a true and exact copy of the record on file with the SHELBY County Health Department.

Gottie S. Maxwell
Signature of Local Registrar

April 27, 1995
Date of Issue

09/12/2000-31370
09:44 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
007 MMB 23.50

ALABAMA
CERTIFICATE OF DEATH

County File Number

State File Number 101

| | | | | | |
|--|--|---|--|---|--|
| 1. DECEASED—NAME First Middle Last (Type last name all capitals) Aubrey Paul BYRAM | | 2. DATE OF DEATH (Month, Day, Year) April 5, 1995 | | 3. COUNTY OF DEATH Shelby | |
| 4. CITY, TOWN, OR LOCATION OF DEATH AND ZIP CODE Alabaster, 35007 | | 5. INSIDE CITY LIMITS (Specify Yes or No) Yes | | 6. PLACE OF DEATH—HOSPITAL OR OTHER INSTITUTION—(If not in either, give street and number) 166 13th St. S.W. | |
| 7. IF HOSPITAL (Specify Inpatient, ER or Outpatient, OOA) Residence | | 8. OF HISPANIC ORIGIN (Specify Yes or No; If Yes, Specify Cuban, Mexican, Puerto Rican, etc.) No | | 9. RACE—(Specify American Indian, Black, White, etc.) White | |
| 10. SEX Male | | 11. AGE 94 yrs | | 12. UNDER 1 YEAR: MONTHS DAYS HOURS MINUTES | |
| 13. DATE OF BIRTH (Month, Day, Year) March 1, 1901 | | 14. DECEASED'S SOCIAL SECURITY NUMBER | | 15. EDUCATION (Specify Only highest grade completed below) Elementary or High School (0-12) 3 College (1-4 or 5+) | |
| 16. MARITAL STATUS (Specify Married, Never Married, Widowed, Divorced) Married | | 17. SURVIVING SPOUSE (If wife, give maiden name) Pearl Bristow | | 18. Was Decedent ever in Armed Forces (Specify Yes or No) No | |
| 19. STATE OF BIRTH (If not in USA, name country) Alabama | | 20. RESIDENCE—STATE Alabama | | 21. COUNTY Shelby | |
| 22. CITY, TOWN, OR LOCATION AND ZIP CODE Alabaster, 35007 | | 23. INSIDE CITY LIMITS (Specify Yes or No) Yes | | 24. STREET AND NUMBER 166 13th St. S.W. | |
| 25. INFORMANT—Name and Address Pearl Bristow 166 13th St. S.W., Alabaster, AL 35007 | | 26. USUAL OCCUPATION (Give kind of work done during most of working life even if retired) Plumber-Retired | | 27. KIND OF BUSINESS OR INDUSTRY Inscho Mechanical Contract | |
| 28. FATHER—NAME First Middle Last Joseph Walter Byram | | 29. MAIDEN NAME OF MOTHER—First Middle Last Lena Blanche Owen | | 30. DISPOSITION OF BODY (Specify Burial, Cremation, Medical Donation, Hospital Disposal, Other) Burial | |
| 31. DATE OF DISPOSITION (Month, Day, Year) APR 7, 1995 | | 32. CEMETERY OR CREMATORY—Name Shelby Memory Gardens | | 33. LOCATION—(City or Town—State) Calera, AL | |
| 34. FUNERAL HOME—Name and Address Rockco Funeral Home P.O. Box 44, Montevallo, AL 35115 | | 35. FUNERAL DIRECTOR—Signature <i>[Signature]</i> | | 36. DATE SIGNED BY FUNERAL DIRECTOR APR 19, 1995 | |
| 37. — Certifying Physician (Physician certifying cause of death) To the best of my knowledge death occurred at the time and date, and due to the cause(s) and manner stated. — Medical Examiner & Coroner On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, place, and due to the cause(s) and manner stated. Signature: <i>[Signature]</i> | | 38. DATE SIGNED (Month, Day, Year) April 27, 1995 | | 39. TIME AND DATE OF DEATH April 5, 1995 | |
| 40. DATE AND TIME PRONOUNCED DEAD (For Coroner/M.E. use only) April 5, 1995 | | 41. NAME AND TITLE OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 40) Jack A. Jones Coroner | | 42. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 40) P.O. Box 916 Columbiana, AL 35051 | |
| 43. REGISTRAR—Signature <i>[Signature]</i> | | 44. DATE FILED (Month, Day, Year) April 27, 1995 | | 45. DATE FILED (Month, Day, Year) April 27, 1995 | |

MEDICAL CERTIFICATION

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| 46. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. LIST ONLY ONE CAUSE ON EACH LINE. IMMEDIATE CAUSE (Final disease or condition resulting in death) → Natural Causes | | APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH | |
| b. DUE TO (OR AS A CONSEQUENCE OF) | | | |
| c. DUE TO (OR AS A CONSEQUENCE OF) | | | |
| 47. PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I. | | 48. WAS THERE A PREGNANCY IN LAST 42 DAYS? (Specify Yes, No, or Unk.) | |
| 49. MANNER OF DEATH (Specify—Accident, Homicide, Suicide, Undetermined Circumstances, Pending Investigation, Natural Cause) Natural Causes | | 50. AUTOPSY (Specify Yes or No) NO | |
| 51. If yes, were findings considered in determining cause of death? (Specify Yes or No) | | 52. HOW INJURY OCCURRED (Enter nature of injury in item 48, Part I & item 47, Part II) | |
| 53. DATE OF INJURY (Month, Day, Year) | | 54. HOUR OF INJURY | |
| 55. INJURY AT WORK (Specify Yes or No) | | 56. PLACE OF INJURY—(Specify at home, farm, street, factory, office building, etc.) | |
| 57. LOCATION OF INJURY (Street or R.F.D. No., City or Town, State) | | 58. | |

This is a legal record and must be filed within five (5) days after death.