

This instrument prepared by:
S. DALE PRICE
ATTORNEY AT LAW
119 No. Broadway Ave.
Sylacauga, AL 35150

TITLE NOT EXAMINED
SEND TAX NOTICE TO GRANTOR
Lynn Nash Gravette
191 Perimeter Road
Sylacauga, AL 35151

GRANTOR:
Lynn Nash Gravette
191 Perimeter Road
Sylacauga, AL 35151

PROPERTY ADDRESS
195 Wilson Drive
Montevallo, AL 35115
DATE OF TRANSFER: 3 FEB 2015
VALUE OF PROPERTY: 15,000 (¼ interest)

GRANTEE:
Lynnette Bates Burton
37 Johnson Drive
Chelsea, AL 35043

GRANTEE:
Julia Lucretia Bates McQuinn
211 Chewala
Auburn, AL 36830

CORRECTIVE WARRANTY DEED WITH RESERVATION OF A LIFE ESTATE

STATE OF ALABAMA §
 §
SHELBY COUNTY §

KNOW ALL MEN BY THESE PRESENTS, that in consideration of Ten and No/100 Dollars (\$10.00) and other good and valuable consideration to the undersigned grantors, in hand paid by the grantees herein, the receipt whereof is acknowledged, LYNN NASH GRAVETTE, a single woman, (herein referred to as grantor) as one of four heirs at law of FLORENCE NASH, grant, bargain, sell and convey unto LYNNETTE BATES BURTON and JULIA LUCRETIA BATES MCQUINN (herein referred to as grantees), reserving unto the grantor, Lynn Nash Gravette, a life estate, my undivided one-fourth interest in and to the following described real estate, situated in Montevallo, Shelby County, Alabama, to wit:

The following tract of land in the town of Montevallo: Beginning at the center of of Section 3, Township 24, N, Range 12 East, as a point of reference, thence north with the land line, north 1 deg, 35’ W 838.6 feet to a point 30 feet south of the center line of Calera and Centreville highway, thence north 85 deg. 30’ west 322 feet along with and parallel with said highway to the NE corner of Lot 1, as a point of reference to the Lot herein conveyed, thence South 4 deg. 11’ East 320 feet to the northeast corner of Lot 7, thence south 85 deg. 49’ west 195 feet to the northwest corner, thence south 45 deg. 11’ east 100 feet to the southeast corner, thence north 85 deg. 49’ east 195 feet to the southwest corner, thence north 4 deg. 11’ west 100 feet to the northeast corner or point of beginning.

This deed is intended to replace the deed previously recorded as instrument #20140812000251340 which contains an erroneous legal description that was taken from a prior deed recorded as instrument #1993-24492. The 1993 deed purportedly conveyed Florence Nash’s interest in the subject property to Lynn Nash Gravette, Wayne Almond Nash, Chelse Landis Nash, and Bennie Vance Nash. Concurrently with the recording of this deed, the death certificate of Florence Nash is recorded, together with affidavits demonstrating that Florence Nash’s heirs at law at the time of her death were Myrtle Lynn Nash Gravette, a.k.a. Lynn Nash Gravette; Bennie Nash, a.k.a. Bennie Vance Nash; Chelse Landis Nash, and Wayne Almond Nash, a.k.a. Wayne A. Nash.

TO HAVE AND TO HOLD to the said grantees, their heirs and assigns forever, subject to the reservation of a life estate to the grantor or an abandonment of the property by the grantor as evidenced by an affidavit certifying the intent to abandon signed by the grantor.

And I do, for myself and for my heirs, executors and administrators, covenant with said grantee, her heirs and assigns, that I am lawfully seized in fee simple of said premises; that they

are free from all encumbrances, unless otherwise stated above; that I have a good right to sell and convey the same as aforesaid; that I will, and my heirs, executors and administrators shall warrant and defend the same to the said grantee, her heirs and assigns forever, against the lawful claims of all persons.

IN WITNESS WHEREOF, We have hereunto set our hands and seals this 3rd day of February 2015.

Lynn Nash Gravette (LS)
Lynn Nash Gravette

STATE OF ALABAMA §
 § General Acknowledgment
TALLADEGA COUNTY §

I, the undersigned authority, a Notary Public in and for said County, in said State, hereby certify that Lynn Nash Gravette, a single woman, whose name is signed to the foregoing conveyance, and who is known to me, acknowledged before me on this day, that, being informed of the contents of the conveyance, she executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 3rd day of February 2015.

S. Nalepka
Notary Public
My Commission expires: 10/21/2018



20150217000050200 2/3 \$24.00
Shelby Cnty Judge of Probate, AL
02/17/2015 02:05:36 PM FILED/CERT

THIS IS A TRUE AND EXACT COPY OF THE RECORD ON FILE WITH THE TALLADEGA COUNTY HEALTH DEPARTMENT.

Helen H. McElroy
Registrar*05/02/2008*
Date of IssueALABAMA
CERTIFICATE OF DEATHCounty
File
Number —

State File Number 101

TYPE IN PERMANENT
BLACK INK. DO NOT
USE GREEN, RED, OR
BLUE INK.3.
6.
19.
20.
26.
27.
34.

1. DECEASED—NAME First Middle Last (Type last name all capitals) Florence McElroy NASH			2. DATE OF DEATH (Month, Day, Year) April 24 2008		3. COUNTY OF DEATH Talladega	
4. CITY, TOWN, OR LOCATION OF DEATH AND ZIP CODE Sylacauga 35150			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) Sylacauga Health and Rehab	
7. IF HOSPITAL (Specify Inpatient, ER or Outpatient, DOA) No			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 Female						
11. AGE 93 YRS.		12. UNDER 1 YEAR MOS. DAYS HOURS MINS.		13. DATE OF BIRTH (Month, Day, Year) October 21 1914		
14. DECEASED'S SOCIAL SECURITY NUMBER [REDACTED]						
15. EDUCATION (Specify ONLY highest grade completed below) Elementary or High School (0-12) 11			16. MARITAL STATUS (Specify Married, Never Married, Widowed, Divorced) Divorced		17. SURVIVING SPOUSE (if wife, give maiden name) No	
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 AL		21. COUNTY Shelby		
22. CITY, TOWN, OR LOCATION AND ZIP CODE Montevallo 35115						
23. INSIDE CITY LIMITS (Specify Yes or No) Yes		24. STREET AND NUMBER 195 Wilson Drive		25. INFORMANT—Name and Address Lynn Gravette 461 Chappell Street Sylacauga, Alabama 35151		
26. USUAL OCCUPATION (Give kind of work done during most of working life even if retired) Sales Clerk			27. KIND OF BUSINESS OR INDUSTRY Retail			
28. FATHER—NAME First Middle Last Archie C. McElroy			29. MAIDEN NAME OF MOTHER— First Middle Last Arrie L. Carroll			
30. DISPOSITION OF BODY (Specify Burial, Cremation, Medical Donation, Hospital Disposal, Other) Burial		31. DATE OF DISPOSITION (Month, Day, Year) April 28, 2008		32. CEMETERY OR CREMATORY—Name Shelby Memory Gardens		
33. LOCATION—(City or Town—State) Calera, AL						
34. FUNERAL HOME—Name and Address Bolton-Letlow Funeral Home 207 Highway 47 South Columbiana AL 35051			35. FUNERAL DIRECTOR—Signature <i>Connie S. Smith</i>		36. DATE SIGNED BY FUNERAL DIRECTOR 4-29-2008	
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>Jerry W. Castleberry</i>					38. DATE SIGNED (Month, Day, Year) APRIL 30, 2008	
39. TIME AND DATE OF DEATH 2:25 PM APRIL 24, 2008		40. DATE AND TIME PRONOUNCED DEAD (For Coroner/M.E. use only)		41. NAME AND TITLE OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46) Jerry W. Castleberry Coroner		
42. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 46) P.O. Box 282 Sylacauga, AL 35150					43. CERTIFIER LICENSE NUMBER	
44. REGISTRAR—Signature <i>Curtene Henderson</i>					45. DATE FILED (Month, Day, Year) May 1, 2008	

MEDICAL CERTIFICATION

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) → a. <i>FAILURE TO Thrive</i> DUE TO (OR AS A CONSEQUENCE OF): b. <i>Secondary to Dementia</i> DUE TO (OR AS A CONSEQUENCE OF): c. DUE TO (OR AS A CONSEQUENCE OF): d. Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST			APPROXIMATE INTERVAL BETWEEN ONSET AND DEATH			
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) <i>NATURAL CAUSE</i>			50. AUTOPSY (Specify Yes or No) <i>NO</i>		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 46, Part I or Item 47, Part II)			53. DATE OF INJURY (Month, Day, Year)		54. HOUR OF INJURY M.	
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)		

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

ADPH-HS 2/Rev. 11-93

ANY ALTERATIONS VOID THIS DOCUMENT

SSN:

20150217000050200 3/3 \$24.00
Shelby Cnty Judge of Probate, AL
02/17/2015 02:05:36 PM FILED/CERT

NAME OF DECEASED