

20200804000331390  
08/04/2020 02:22:52 PM  
QCDEED 1/5

AFTER RECORDING RETURN TO:  
GODEEDS, INC.  
Attn: LegalZoom Dept.  
8940 Main Street  
Clarence, NY 14031  
File No. 538312015-62849683

MAIL TAX STATEMENTS TO:  
**Leanne Liangtong Chen**  
1080 Rocky Run  
McLean, VA 22102

This document prepared by:  
George Vaughn, Esq.  
8940 Main Street  
Clarence, NY 14031  
866-333-3081

Tax ID No.: 09 4 202 007 029.000

QUIT CLAIM DEED

THIS DEED made and entered into on this 3 day of July, 20 20, by and between **Leanne Liangtong Chen, a/k/a Leanne Chen, individually and as surviving joint tenant of Patrick Lao, who died 03/12/2009**, a mailing address of 1080 Rocky Run, McLean, VA 20102, hereinafter referred to as Grantor(s) and **Leanne Liangtong Chen, as trustee of The Leanne Liangtong Chen Living Trust, dated 07/03/20**, a mailing address of 1080 Rocky Run, McLean, VA 20102, hereinafter referred to as Grantee(s).

WITNESSETH: That the said Grantor(s), for and in consideration of the sum of ONE and NO/100 (\$1.00) DOLLAR, cash in hand paid, the receipt of which is hereby acknowledged, have this day remise, release, quitclaim and convey to the said Grantee(s) the following described real estate located in Shelby County, ALABAMA:

SEE ATTACHED EXHIBIT "A" FOR LEGAL DESCRIPTION.

Also known as: 114 Narrows Peak Circle, Birmingham, AL 35242

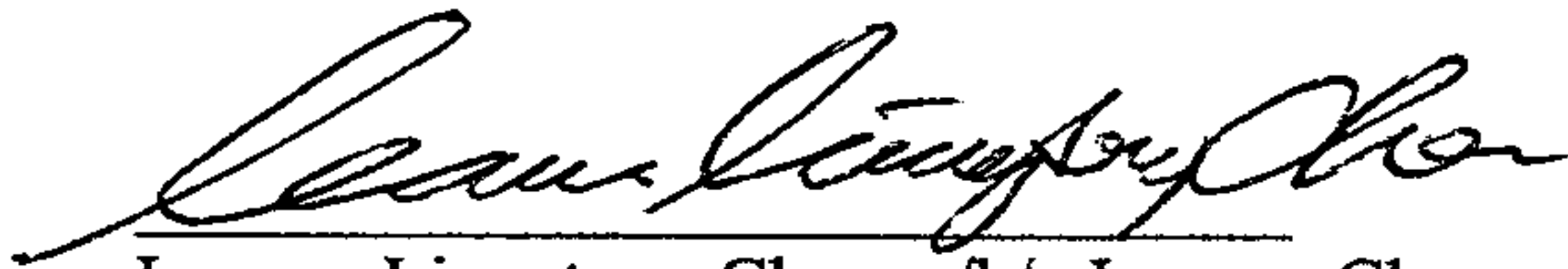
SUBJECT TO EASEMENTS, COVENANTS, CONDITIONS, RESTRICTIONS, RESERVATIONS, AND LIMITATIONS OF RECORD, IF ANY.

Prior instrument reference: Document Number: 20050922000491750, Recorded: 09/22/2005

TO HAVE AND TO HOLD the lot or parcel above described together with all and singular the rights, privileges, tenements, hereditaments and appurtenances thereunto belonging or in anywise appertaining unto the said Grantee(s) and unto the heirs, administrators, successors or assigns of the Grantee(s) forever in FEE SIMPLE.

And that said conveyance does not render the Grantor(s) insolvent nor is it for the purpose of defrauding any of the creditors of the Grantor(s).


IN WITNESS WHEREOF, the said Grantor(s) has/have signed and sealed this deed, the day and year above written.

  
Leanne Liangtong Chen, a/k/a Leanne Chen

STATE OF Virginia  
COUNTY OF Fairfax

I, the undersigned, a Notary Public in and for said county and state, hereby certify that Leanne Liangtong Chen, a/k/a Leanne Chen, whose name(s) is/are signed to the foregoing conveyance, who is known to me, acknowledged before me on this day that being informed of the contents of said conveyance, she/he/they executed the same voluntarily on the day the same bears date.

Given under my hand and seal this the 3<sup>rd</sup> day of July, 2020.

  
NOTARY PUBLIC  
My commission expires: 4/31/2021

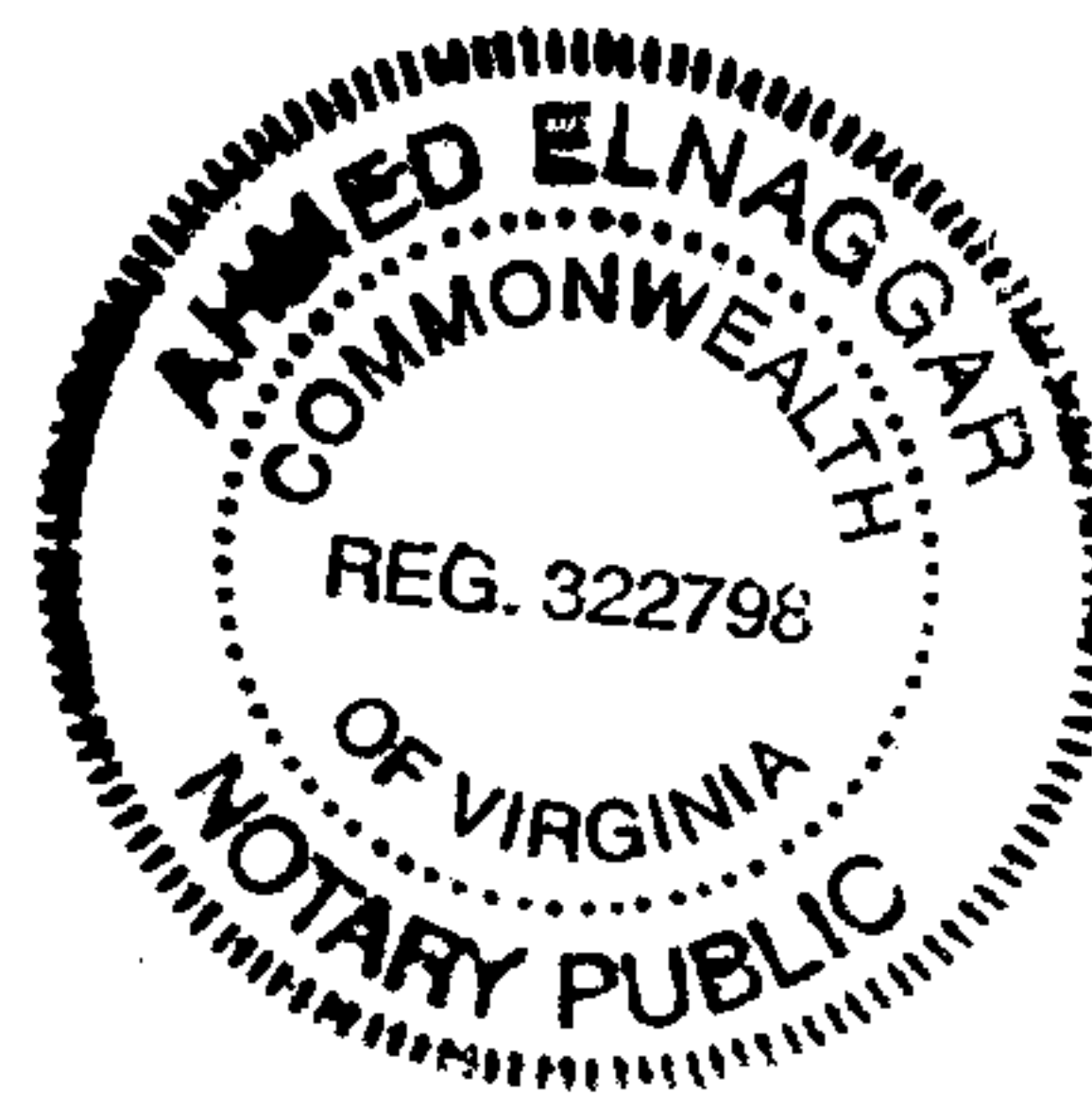


EXHIBIT A  
LEGAL DESCRIPTION

THE FOLLOWING DESCRIBED REAL ESTATE, SITUATED IN SHELBY COUNTY, ALABAMA, TO-WIT:

LOT 29, ACCORDING TO THE AMENDED FINAL RECORD PLAT OF NARROWS PEAK SECTOR, AS RECORDED IN MAP BOOK 31 PAGE 125 A & B, IN THE PROBATE OFFICE OF SHELBY COUNTY, ALABAMA; BEING SITUATED IN SHELBY COUNTY, ALABAMA (THE "PROPERTY").

TOGETHER WITH THE NONEXCLUSIVE EASEMENT TO USE THE COMMON AREAS AS MORE PARTICULARLY DESCRIBED IN THE NARROWS RESIDENTIAL DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS RECORDED AS INST. #2000-9755 IN THE PROBATE OFFICE OF SHELBY COUNTY, ALABAMA (WHICH, TOGETHER WITH ALL AMENDMENTS THERETO, IS HEREINAFTER COLLECTIVELY REFERRED TO AS THE "DECLARATION").

SUBJECT TO: (1) AD VALOREM TAXES DUE AND PAYABLE OCTOBER 1, 2005 AND ALL SUBSEQUENT YEARS THEREAFTER; (2) FIRE DISTRICT ASSESSMENTS FOR 2005 AND SUBSEQUENT YEARS NOT YET DUE AND PAYABLE; (3) MINERAL AND MINING RIGHTS NOT OWNED BY GRANTOR; (4) THE EASEMENTS, RESTRICTIONS, COVENANTS, AGREEMENTS AND ALL OTHER TERMS AND PROVISIONS OF THE DECLARATION OF COVENANTS, CONDITIONS AND RESTRICTIONS RECORDED IN INSTRUMENT #2000-9755, INSTRUMENT #2000-17136, INSTRUMENT #2000-36696; INSTRUMENT #2001-38328; INSTRUMENT #20020905000424180; INSTRUMENT #20021017000508250; AND INSTRUMENT #20030716000450980 IN THE PROBATE OFFICE OF SHELBY COUNTY, ALABAMA; (5) ALL EASEMENTS, RESTRICTIONS, RESERVATIONS, AGREEMENTS, RIGHTS-OF-WAY, BUILDING SETBACK LINES AND ANY OTHER MATTERS OF RECORD.

PROPERTY COMMONLY KNOWN AS: 114 NARROWS PEAK CIRCLE, BIRMINGHAM, AL 35242



## STATE OF CALIFORNIA

## CERTIFICATION OF VITAL RECORD

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## COUNTY OF ORANGE

## HEALTH CARE AGENCY

1200 N. MAIN STREET, SUITE 100-A

SANTA ANA, CA 92701

## CERTIFICATE OF DEATH

3200930003492

STATE FILE NUMBER		LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT - FIRST (Given)		2. MIDDLE	
PATRICK		QIAN	
3. LAST (Family)		4. DATE OF BIRTH mm/dd/yyyy	
LAO		10/11/1963	
5. AGE Yrs.		6. SEX	
45		M	
7. DATE OF DEATH mm/dd/yyyy		8. HOUR (24 Hours)	
03/12/2009		1625	
9. BIRTH STATE/FOREIGN COUNTRY		10. SOCIAL SECURITY NUMBER	
CHINA		156-88-7326	
11. EVER IN U.S. ARMED FORCES?		12. MARITAL STATUS (at time of death)	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK		MARRIED	
13. EDUCATION - Highest Level/Degree (See worksheet on back)		14. WAS DECEDENT HISPANIC/LATINO/ASIAN? (If yes, list race on back)	
MASTER'S		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		16. DECEDENT'S RACE - Up to 3 races may be listed (See worksheet on back)	
CHEMIST		CHINESE	
17. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.)		18. YEARS IN OCCUPATION	
ENVIRONMENTAL		6	
19. DECEDENT'S RESIDENCE (Street and number or location)			
27786 COUNTRY LANE ROAD			
20. CITY		21. COUNTY/PROVINCE	22. ZIP CODE
LAGUNA NIGUEL		ORANGE	92677
23. YEARS IN COUNTY		24. STATE/FOREIGN COUNTRY	
15		CA	
25. INFORMANT'S NAME, RELATIONSHIP			
LEANNE L. CHEN, WIFE			
26. ADDRESS (Street and number or location)			
27786 COUNTRY LANE ROAD, LAGUNA NIGUEL, CA 92677			
27. NAME OF SURVIVING SPOUSE - FIRST		28. MIDDLE	29. LAST (Maiden Name)
LEANNE		L	CHEN
30. NAME OF FATHER - FIRST		31. MIDDLE	32. LAST
SHUINIAN			LAO
33. NAME OF MOTHER - FIRST		34. MIDDLE	35. LAST (Maiden)
SHAOXIAN			LING
36. BIRTH STATE		37. BIRTH STATE	
CHINA		CHINA	
38. DISPOSITION DATE mm/dd/yyyy		39. PLACE OF FINAL DISPOSITION	
03/20/2009		EL TORO MEMORIAL PARK	
40. TYPE OF DISPOSITION(S)		41. SIGNATURE OF EMERALD	
CR/BU		NOT EMBALMED	
42. NAME OF FUNERAL ESTABLISHMENT		43. LICENSE NUMBER	44. SIGNATURE OF LOCAL REGISTRAR
SADDLEBACK CHAPEL		FD1099	ERIC G. HANDLER, M.D.
45. DATE mm/dd/yyyy		46. DATE mm/dd/yyyy	
03/15/2009		03/15/2009	
47. PLACE OF DEATH		48. IF HOSPITAL, SPECIFY ONE	
PACIFIC HAVEN HEALTHCARE CENTER		<input type="checkbox"/> IF <input type="checkbox"/> ER/OP <input type="checkbox"/> DCA <input type="checkbox"/> Hospice <input checked="" type="checkbox"/> Nursing Home/LTC <input type="checkbox"/> Decedent's Home <input type="checkbox"/> Other	
49. COUNTY		50. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number or location)	
ORANGE		12072 TRASK AVENUE	
51. CITY		52. CITY	
GARDEN GROVE		GARDEN GROVE	
53. CAUSE OF DEATH		54. DEATH REPORTED TO CORONER?	
IMMEDIATE CAUSE (A) LOBAR PNEUMONIA, BILATERAL LOWER LOBES		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
SEQUENTIALLY LIST CONDITIONS, IF ANY, LEADING TO CAUSE ON LINE A. ENTER UNDERLYING CAUSE (Disease or injury that initiated the events resulting in death) LAST		55. BIOPEY PERFORMED?	
(B) DECREASED MOBILITY		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
(C) BLUNT HEAD TRAUMA		56. AUTOPSY PERFORMED?	
(D)		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
57. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107		58. USED IN DETERMINING CAUSE?	
MODERATE ATHEROSCLEROSIS, RIGHT ANTERIOR CEREBRAL ARTERY; ARTERIAL NEPHROSCLEROSIS		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
59. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date)		60. IF FEMALE, PREGNANT IN LAST YEAR?	
CRANIOTOMY, 02/01/2009		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNK	
61. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED		62. SIGNATURE AND TITLE OF CERTIFIER	
Decedent Attended Since: mm/dd/yyyy		116. LICENSE NUMBER	
Decedent Last Seen Alive: mm/dd/yyyy		117. DATE mm/dd/yyyy	
63. TYPE ATTENDING PHYSICIAN NAME, ADDRESS, ZIP CODE		64. TYPE ATTENDING PHYSICIAN NAME, ADDRESS, ZIP CODE	
65. I CERTIFY THAT IN MY OPINION DEATH OCCURRED AT THE HOUR, DATE, AND PLACE STATED FROM THE CAUSES STATED		66. INJURED AT WORK?	
MANNER OF DEATH <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Accident <input type="checkbox"/> Homicide <input type="checkbox"/> Suicide <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Could not be determined		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK	
67. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		68. INJURY DATE mm/dd/yyyy	
BICYCLE PATH		02/01/2009	
69. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)		69. HOUR (24 Hours)	
FALL, FROM BICYCLE		1104	
70. LOCATION OF INJURY (Street and number, or location, and city, and ZIP)		71. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	
18700 HARVARD AVENUE, IRVINE, CA 92612		KELLY KEYES, DEPUTY CORONER	
72. SIGNATURE OF CORONER / DEPUTY CORONER		73. DATE mm/dd/yyyy	
KELLY KEYES		03/13/2009	
74. STATE REGISTRAR		75. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	
A B C D E		KELLY KEYES, DEPUTY CORONER	
76. FAX AUTH. #		77. CENSUS TRACT	

CERTIFIED COPY OF VITAL RECORDS

MAR 23 2009

\*002503481\*

STATE OF CALIFORNIA

COUNTY OF ORANGE

SS

DATE ISSUED

This is a true and exact reproduction of the document officially registered and placed on file in the office of the VITAL RECORDS SECTION, ORANGE COUNTY HEALTH CARE AGENCY.

*Eric G. Handler M.D.*

ERIC G. HANDLER, M.D.  
HEALTH OFFICER  
ORANGE COUNTY, CALIFORNIA

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.

PBNCO (Rev) 11/06



20200804000331390 08/04/2020 02:22:52 PM QCDEED 5/5  
Real Estate Sales Validation Form

*This Document must be filed in accordance with Code of Alabama 1975, Section 40-22-1*

Grantor's Name Leanne Chen, survived by Patrick Lao  
Mailing Address 1080 Rocky Run  
McLean, VA 20102

Grantee's Name The Leanne Liangtong Chen Living Trust  
Mailing Address 1080 Rocky Run  
McLean, VA 20102

Property Address 114 Narrows Peak Circle  
Birmingham, AL 35242

Date of Sale 07/3/2020

Total Purchase Price \$ 0.00

or

Actual Value \$

or

Assessor's Market Value \$ 26,640

The purchase price or actual value claimed on this form can be verified in the following documentary evidence: (check one) (Recordation of documentary evidence is not required)

☐ Bill of Sale  
☐ Sales Contract  
☐ Closing Statement

☐ Appraisal  
☐ Other Assessor's Value

If the conveyance document presented for recordation contains all of the required information referenced above, the filing of this form is not required.

### Instructions

Grantor's name and mailing address - provide the name of the person or persons conveying interest to property and their current mailing address.

Grantee's name and mailing address - provide the name of the person or persons to whom interest to property is being conveyed.

Property address - the physical address of the property being conveyed, if available.

Date of Sale - the date on which interest to the property was conveyed.

Total purchase price - the total amount paid for the purchase of the property, both real and personal, being conveyed by the instrument offered for record.

Actual value - if the property is not being sold, the true value of the property, both real and personal, being conveyed by the instrument offered for record. This may be evidenced by an appraisal conducted by a licensed appraiser or the assessor's current market value.

If no proof is provided and the value must be determined, the current estimate of fair market value, excluding current use valuation, of the property as determined by the local official charged with the responsibility of valuing property for property tax purposes will be used and the taxpayer will be penalized pursuant to Code of Alabama 1975 § 40-22-1 (h).

I attest, to the best of my knowledge and belief that the information contained in this document is true and accurate. I further understand that any false statements claimed on this form may result in the imposition of the penalty indicated in Code of Alabama 1975 § 40-22-1 (h).

Date 7/29/20

Print Kristen Sandarelli, Legal Representative

Sign



(Grantor/Grantee/Owner/Agent) circle one

Unattested

Filed and Recorded (verified by)  
Official Public Records  
Judge of Probate, Shelby County Alabama, County Clerk  
Shelby County, AL  
08/04/2020 02:22:52 PM  
\$61.00 JESSICA  
20200804000331390



Form RT-1

*Alvin S. Bond*