After Recording, Send to:
Allegiant Reverse Services
905 Highland Point Drive, Suite 150
Roseville, CA 95678

File No. ARS-103728

AFFIDAVIT OF DEATH

STATE OF Alabama COUNTY OF Shelby

We, Judy C. Kealer and Betty Sue Liming ("Affiants"), whose mailing address is 232 Appleford Road, Helena, AL 35080, being of legal age of consent and competent to make this Affidavit, and we are familiar with the past ownership and occupancy of the real property described below in this Affidavit, being duly sworn, depose and say as follows:

That Shirley L. Brown, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as Shirley C. Brown, named as one of the parties in that certain deed dated March 8, 2019, executed by Linda A Wade to Shirley C. Brown and Judy C. Kealer and Betty Sue Liming, for and during their joint lives, and upon death of either of them, then to the survivor of them in fee simple, together with every contingent remainder and right of reversion, recorded at Instrument No. 20190318000084480, on March 18, 2019, in the Office of the Judge of Probate of Shelby County, State of Alabama, concerning the following described real estate described below:

Lot 246, according to the Survey of Hillsboro Subdivision, Phase I, as recorded in Map Book 37, Page 104 A, B and C, in the Office of the Judge of Probate of Shelby County, Alabama.

Parcel ID: 13-5-16-4-002-062-000

Commonly known as 232 Appleford Road, Helena, AL 35080

Affiants gives this Affidavit for the purpose of transferring the title to the foregoing property to Affiants on the records of the Recorder's Office in Shelby County, Alabama.

Affiants declares that the foregoing is true and correct.

Judy C. Kealer

Signed in counterpart

Betty Sue Liming

STATE OF FLORIDA

COUNTY OF ESCAMBIA

Subscribed and sworn to (or affirmed) before me on this 29 day of ANGUST, 2024, by Judy C. Kealer and Butty Sue Liming, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

(seal)

Signature

FOR NOTARY STAMP

Commission # HH 573526
Commission Expires 07-21-2028
Bonded Through - Cynanotary
Florida - Notary Public

Prepared by: Thomas Granville McCroskey, Esq., Alabama Bar No. 0066C36T, 5315 N Clark Street #173, Chicago, IL 60640, (866) 363-3337.

The preparer of this instrument has neither been requested to nor has the preparer conducted a title search or an inspection of the Demised Premises transferred hereby. No representations or warranties as to accuracy of the description, the status of title or condition of the Demised Premises have been made by the preparer.

Affiants declares that the foregoing is true and correct.

Signed in counterpart

Judy C. Kealer

Betty Sue Limina

STATE OF ALARAMA
COUNTY OF SHELBY

Subscribed and sworn to (or affirmed) before me on this $\underline{29}$ day of $\underline{5EPTEMBER}$, $20\underline{24}$, by $\underline{\text{dudy 6. Kealer}}$ and $\underline{\text{Betty Sue Liming}}$, proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

(seal)

Signature

LEON NASH
Notary Public, Alabama State at Large
My Commission Expires 07/02/2025

FOR NOTARY STAMP

Prepared by: Thomas Granville McCroskey, Esq., Alabama Bar No. 0066C36T, 5315 N Clark Street #173, Chicago, IL 60640, (866) 363-3337.

The preparer of this instrument has neither been requested to nor has the preparer conducted a title search or an inspection of the Demised Premises transferred hereby. No representations or warranties as to accuracy of the description, the status of title or condition of the Demised Premises have been made by the preparer.

ALABAMA
CERTIFICATE OF DEATH State
ALABAMA CERTIFICATE OF DEATH Sumber 101 2019-24812

1. DECEASED LEGAL NAME							2. 1	DATE AND TIME ()F DEATH
Shirley L Brown						Jun 20, 2019 2335			
3. ALIAS NAME(IF ANY)				 -			4. 1	DATE AND TIME I	RONOUNCED DEAD
None Given				· · · · · · · · · · · · · · · · · · ·		 			
5. COUNTY OF DEATH	6. CITY, TOWN OR L	OCATION OF DEA	TH AND ZIP (CODE	7. PLACI	E OF DEATH			···:
Jefferson	Birmingham,				Com	passus Ho	spice Care		
8. SEX	9. LAST NAME PRIO	R TO FIRST MARR	IAGE					1	8. SERVED IN ARMED FORCES
Female	Crocker			T-2					No
MONTHS DAYS I	IRS MINS	ATE OF BIRTH			•	or Foreign Count	r y)	14. SOCIAL	SECURITY NUMBER
15. MARITAL STATUS 16. SU		b 10, 1936		Missi	ssippi	<u> </u>	l s e	TEST PROPERTY	
[4] F. G. G. Markett, Phys. Rev. B 48, 127 (1997).	RVIVING SPOUSE NAME	PRIOR TO FIRST	MAKKIAGE		· · ·		-	RESIDENCE STAT	l E
Widowed	10 CUTY TOWN OR	T O CARTON A STR O	ZID CODE		AO CUEDANTE A	DDDDGG		Alabama	
18. RESIDENCE COUNTY	19. CITY, TOWN OR		eir code		20. STREET A		•	•	
Shelby 21. INFORMANT NAME, RELATIONS	Helena, 350	80			232 Apr	oleford Ro	ad		· · · · · · · · · · · · · · · · · · ·
		-	_	1 -		•			
Judy C Kealer, Daughte		Lagoon Co					FIDOT MADDI	4-7-TC	
22. FATHER/PARENT NAME PRIOR TO FIRST MARRIAGE 23. MOTHER/PARENT NAME PRIOR TO FIRST MARRIAGE									
Russell Luther Crocker				Lillie	L Leake		• • • • • • • • • • • • • • • • • • •		
	METERY OR CREMATO					26. LOCATION	·. · · · · · ·	•	
	iset Memorial Pa	rk			<u> </u>		rt, Alaban		
	NERAL DIRECTOR					29. LICENSE N	UMBER	30. DATE SIGNE	
Jun 24, 2019 Rodney R Ward					<u></u>		Jul 1, 201		
31, FUNERAL HOME NAME AND ADDRESS								32. LICENSE NU	MBER
Sunset Funeral Home,	3802 Watermelo	n Rd, North	iport, AI	. 35476					
33. 100 m 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.									
MEDICAL CERTIF	ICATION: Cen	tifying Phys	ician			 	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
34. NAME						35. LICENSE N	UMBER	36. DATE SIGNE	D
Lee Wimberly MD						23248	<u> </u>	Jun 27, 2	019
37. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH									
4941 Montevallo Rd, B	irmingham, Ala	bama 35210)						
38. REGISTRAR					· · · · · ·			39. DATE FILED	:
Nicole Henderson Rush	ing			2 HA		· · · · · · · · · · · · · · · · · · ·	<u> </u>	Jul 1, 201	9
CAUSE OF DEATH									
40. PART L DISEASES, INJURIES OR C IMMEDIATE	COMPLICATIONS THAT	CAUSED DEATH			•			INTERV	AL
CAUSE A Heart Failure								Unkno	Wn
DUE TO (OR AS A CO						· · · . · · _· · · · ·			
B. Atrial Fibrillation			·		<u> </u>	· · · · · · · · · · · · · · · · · · ·		Unkno	WI
DUE TO (OR AS A CO	INSEQUENCE OF):					.:			
Chronic Kidney	Disease					· · · · · · · · · · · · · · · · · · ·		Unkno	₩n
DUE TO (OR AS A CO	INSEQUENCE OF):	· · · · · ·				:	•;•••		
D.		· · · · · · · · · · · · · · · · · · ·			 		·		<u> </u>
41. PART IL OTHER SIGNIFICANT CO	NDITIONS CONTRIBUT	ENG TO DEATH	er gigereleighe. Gadhlightach						
	- : : : : : : : : : : : : : : : : : : :					: - :		. · · · · · · · · · · · · · · · · · · ·	
42. MANNER OF DEATH	43. PREGNANT	(IF FEMALE)	44.	AUTOPSY	45. FINDINGS CONSIDERE		LOGY 47. FIN CONS	DINGS 48. TOB IDERED CONTR	ACCO USE IBUTED TO DEATH
Natural Causes				No		No		Unk	nown
49. HOW INJURY OCCURRED							·.		
	Eilad and Daga	ndad				• • • • • • • • • • • • • • • • • • •	·		
59. DATE AND TIME OF INJURY Official Public Records 51. INJURY AT WORK 52. IF TRANSPORTATION INJURY, SPECIFY									
		te Shelby County		ounty		··	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
53. PLACE OF INJU	Shelby County	AL54. LOCATION	OF INJURY						
	12/02/2024 08:				·. · · · · · · · · · · · · · · · · · ·				
AHAM	202412020003	•						A	DPH HS E2/REV 01-16
·				alli	5.R.1			· · ·	

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery, Alabama. 2024-404-014-7

Nicole Henderson Rushing State Registrar of Vital Statistics

ANY ALTERATIONS VOID THIS DOCUMENT