

Prepared By
Robert Cooley
111 Sharmelre LN
Crawfordville FL
32327

X

A298-10
R298-04

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this 14 day of July, 2016 (year),
by first party, Grantor, Beulah V King.
whose post office address is 111 Sharmelre LN Crawfordville FL 32327
to second party, Grantee, Melody Cooley or Drew Redman
whose post office address is 111 Sharmelre LN Crawfordville FL 32327

WITNESSETH, That the said first party, for good consideration and for the sum of
Dollars (\$ 1.00) paid by the said second
party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim
unto the said second party forever, all the right, title, interest and claim which the said first party
has in and to the following described parcel of land, and improvements and appurtenances there-
to in the County of Wakulla, State of Florida to wit:

Property I.D. 00-00-078-013-11312-000
.114
MAGNOLIA GARDENS
Block 0 Lot 7
DB 56 P 388

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Shelby Boykin
Signature of Witness

Beulah V King
Signature of First Party

Shelby Boykin
Print name of Witness

Beulah V King
Print name of First Party

[Signature]
Signature of Witness

Signature of First Party

Shelby Boykin
Print name of Witness

Print name of First Party

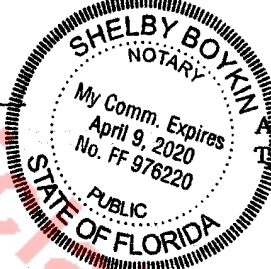
State of Florida
County of Wakulla

On 7-22-16 before me, Shelby Boykin

appeared Beulah King personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Shelby Boykin
Signature of Notary



Affiant Known X Produced ID
Type of ID FDL (Seal)

State of _____
County of _____
On _____

appeared _____ before me, _____ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature of Notary

Affiant _____ Known _____ Produced ID
Type of ID _____ (Seal)

Signature of Preparer

Print Name of Preparer

Address of Preparer