

Return to: (enclose self-addressed stamped envelope)

Name: Stephanie M. Raker

Address: 175 Sanders Cemetery Rd.
Sopchoppy, FL 32358

This Instrument Prepared by:

Address: 11

Property Appraisers Parcel Identification (Folio Number(s)).

Quit Claim Deed

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Quit Claim Deed, Executed the 11 day of May, 2016

BY: (first party), Ruel W. Raker III and Stephanie M. Raker Husband + Wife

TO: (second party), Ruel W. Raker III and Stephanie M. Raker

Whose post office address is: 175 Sanders Cemetery Rd. Sopchoppy, FL 32358

(Wherever used herein the terms "first party" and "second party" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth, That the first party, for and in consideration of the sum of \$ 10.00, in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quit-claim unto the second party forever; all the right, title, interest, claim and demand which the said first party has in and to the following described lot, piece or parcel of land, situate, lying and being in the County of Wakulla, State of Florida, to wit:

See Attached

To have and to hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

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 the presence of:

Renea DeLong
Witness Signature (as to first Grantor)

Renea DeLong
Printed Name

Donna Richardson
Witness Signature

Donna Richardson
Printed Name

Renea DeLong
Witness Signature (as to Co-Grantor, if any)

Renea DeLong
Printed Name

Donna Richardson
Witness Signature (as to Co-Grantor, if any)

Donna Richardson
Printed Name

STATE OF Florida
COUNTY OF Wakulla

Ruel W. Raker III
Grantor Signature

RUEL W. RAKER III
Printed Name

175 SANDERS CEMETERY RD.
Post Office Address
SOPCHOPPY, FL. 32358

Stephanie Raker
Co-Grantor Signature (if any)

Stephanie Raker
Printed Name

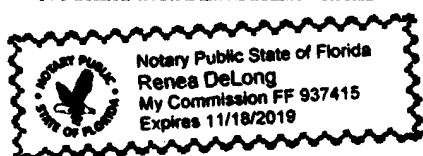
175 Sanders Cemetery Rd.
Post Office Address
Sopchoppy, FL 32358

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared

Ruel W. Raker III and Stephanie M. Raker

known to me to be the person(s) described in and who executed the foregoing instrument, who acknowledged before me that he/she/they executed the same, and an oath was not taken. (Check one:) ☐ Said person(s) is/are personally known to me. ☒ Said person(s) produced the following form(s) of identification: FL DL exp 5/24/21 and exp 12-26-18

NOTARY RUBBER STAMP SEAL



Witness my hand and official seal in the County and State last aforesaid this

11th day of May, A.D. 2016

Renea DeLong
Notary Signature

Renea DeLong
Printed Notary Signature

[illegible]

