

Return to: (enclose self-addressed stamped envelope)

Name: Edith Adams

Address: P.O. Box 544
Lake City, Fla. 32056

This instrument Prepared by

Dale A. Martin

Address:

8106 State RD 247

Lake City, Fla. 32024

Property Appraisers Parcel

Identification (Folio) Number(s):

R10792.000

Grantee(s) S.S.#(s):

Inst. 201312004172 Date: 3/19/2013 Time: 4:04 PM

Doc Stamp-Deed: 0.70

DC, P. DeWitt Cason, Columbia County Page 1 of 3 B. 1251 P. 1309

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Processing Data

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for Recording

THIS QUIT-CLAIM DEED, Executed this 19 day of March,
2013, by

first party, to Dale A. Martin
8106 State RD 247
Lake City, Fla. 32024
whose post office address is

second party: Edith Adams
P.O. Box 544
Lake City, Fla. 32056

(Wherever used herein the terms "first party" and "second party" shall include singular and plural, heirs, legal representatives, and assigns of individuals, and the successor and assigns corporations, wherever the context so admits or requires.)

WITNESSETH, that the said first party, for and in consideration of the sum of Ten Dollars (\$ 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 said 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 Columbia, State of Florida, to-wit:

From a point of beginning obtained as follows:

[Insert Description]

00-00-00 0100/0100 .13 Acres
NE DIV: LOT 10 BLOCK 4
WASHINGTON PARK S/D.
PROB 89-271-CP ORB 698-807,
711-295

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:

x Bonnie Dow
Witness Signature
(as to the first Grantor)

x Don A Martin - also A Martin
Grantor Signature

Printed Name
x BONNIE DOW
Witness Signature
(as to first Grantor)

Printed Name Don A Martin
8106 State Rd. 247
Lake City, Fla. 32024
Post Office Address

Printed Name
x Elizabeth Free
Witness Signature
(as to the co-Grantor, if any)

x _____
Co-Grantor Signature, if any

Printed Name
x _____
Witness Signature
(as to the co-Grantor, if any)

Printed Name

Post Office Address

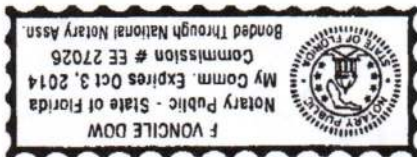
Printed Name

STATE OF FLORIDA

COUNTY OF Columbia

I HEREBY CERTIFY, that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Dale A. Martin to me known to be the person(s) Dale A. Martin described in and who executed the foregoing Quit-Claim Deed and that (he) (~~she~~) (~~they~~) acknowledged before me that (he) (~~she~~) (~~they~~) executed the same of (his) (~~her~~) (~~their~~) own will and deed. I relied upon the following form(s) of identification of the above named person(s) FL DIL. An oath (was) (was not) taken.

WITNESS my hand and official seal in the County and State last aforesaid this 19th day of March, A.D. 2013.



Comm. #/Expiration Date _____

F Voncile Dow
Notary Signature
F Voncile Dow
Printed Notary Signature

