Return to: (enclose self-addressed stamped envelope)

Name: 5 Bar Pouble V. Ranch LCC Address: 305 Alferd Way Venice 71 34275

This Instrument Prepared by:

Property Appraisers Parcel Identification

Folio Number(s):

Grantee[s] S.S. # (s)

RECORDED IN OFFICIAL RECORDS February 13, 2017 03:52:45 PM SARASOTA COUNTY, FL

Doc Stamp-Deed: \$0.70

This Quit Claim Beed, Executed the	<i>o</i> / .	3 m	•	Tanna Tanna		NG DATA	. bv
This Quit Claim Beed, Executed the TAMES E. Foster						Date	, 。,
first party, to 3 BAR, Double J Ran	(Ch)	LNI					·
whose post office address is 6035 LauAll second party.	CR	- 7 <u>2</u>	Gles	tou	71	3422	<u></u> ,
(Wherever used herein the terms "first party" and "second party" include all t successors and assigns of corporations, wherever the context so admits or requ		to this instrume	ent and the heirs.	legal represent	atives, and as	ssigns of individual	s, and the
in hand paid by the said second party, for and in in hand paid by the said second party, the receip and quit claim unto the second party forever, all party has in and to the following described lot, piece 500050 pm , St. F. Con Soft 18 . 48 . 50 . 68 . 50 . 68 . 60 . 60 . 60 . 60 . 60 . 60 . 6	the right or parate of The state of The state of The state of The state of	cof is here the title, reel of lar Conser Co	eby acknown interest, cliented, situate, less the second of the second o	ledged, do aim and d ying and b ARA SOUTH	es herele we eing in the start of the start	by remise, replication the said he Country of officers. The Country of the count	Sul.
To Have and to Hold The same toget or in anywise appertaining, and all the estate, rifirst party, either in law or equity to the only property. In Mitness Mhereof, the said first pabove written.	her with ght, titl ruse, b	h all and le, interes enefit and	singular th t, lien, equ behoof of t	ie appurted ity and clo he said sec	nances that aim what cond part	hereunto belo tsoever of th ty forever.	onging e said
Signed, sealed and delivered in the presence of:			2	As -			
Witness Signature (as to first Grantor)	_<		701	yer			LS.
Withess Signature Las to first Grantor)		Grantor Si	Phature NULS F	Taction			
Printed Name Witness Signature (as to first Graptor) Printed Name	· · · · · · · · · · · · · · · · · · ·	Printed Na 4019 Post Office	Lausel	C. To	- jellen	fou 7	<u>/</u>
Printed Name							
Witness Signature (as to Co-Grantor, if any)		Co-Granto	г Signature, (if any	·)	<u> </u>	<u> </u>	L.S.
Printed Name	·	Printed Na	me		·····	<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>
Witness Signature (as to Co-Grantor, if any)		Post Offic	e Address	· · · · · · · · · · · · · · · · · · ·			
Printed Name							
STATE OF State of Florida)						
COUNTY OF County of Manatee)			_		officer duly au its, personally a	
known to me to be the person described in and who exe	cuted the	foregoing :-	ictrumant who	. acknowlada	ed bafa	na that	
executed the same, and an oath was not taken. (Check one:)				•			
following type of identification:	- Said		are personany	KHOWH (U II)	c. u said	person(s) prov	ւսсն (Ո
NOTARY RUBBER STAMP SEAL						and State last at	
SUELLYN M. WOTHERSPOON		this 12	day	of respiration	Ruce 1 4		7 / 7 Date
Notary Public, State of Florida		Accedi	egn til	1. Car	renge	2000	
		Notary Signatur	<i>+</i> 3			<u> </u>	

Printed Name

My comm. expires Aug. 23, 2017 Comm. No. FF 22040