

This instrument Prepared By:

\_\_\_\_\_  
Name - Typed or Printed

\_\_\_\_\_  
Mailing Address

Return to:

\_\_\_\_\_  
Name Typed or Printed

\_\_\_\_\_  
Mailing Address

### QUIT CLAIM DEED

THIS QUIT CLAIM DEED, Executed this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_\_, by \_\_\_\_\_

grantor, whose post office address is: \_\_\_\_\_

to \_\_\_\_\_

grantee, whose post office address is: \_\_\_\_\_

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations.)

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

Property Appraiser's Parcel Identification Number \_\_\_\_\_

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 for the said grantor, either in law or equity, to the only proper use, benefit and behoof of the said grantee forever.

IN WITNESS WHEREOF, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in presence of:

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Name - Typed or Printed

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Name - Typed or Printed

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name Typed or Printed

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name - Typed or Printed

STATE OF FLORIDA,                    }  
COUNTY OF \_\_\_\_\_}

THE FOREGOING INSTRUMENT was acknowledged before me, by means of physical presence or online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or who has/have produced \_\_\_\_\_ as identification and who did/did not take an oath.

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Name of Notary Public - Typed, Printed