	Document	Prepared	By:
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Parcel ID Number:

Quitclaim Deed

This Quitclaim Deed, Made this	day of		,	A.D. ,	Between	
of the County of	,	State of F]	lorida		, grantor,	and
whose address is:						
of the County of Witnesseth that the GRANTOR, for and in considerati					, grantee.	. D.G
and other good and valuable consideration to GRAN granted, bargained and quitclaimed to the said GRANTEE lying and being in the County of	NTOR in hand	l paid by GRANTEE, t	he receipt who assigns forever,	ereof is hereb	y acknowledged,	has
To Have and to Hold the same together we appertaining, and all the estate, right, title, inter the use, benefit and profit of the said grantee forever. In Witness Whereof, the grantor has hereunto set	rest, lien, equ		ver of granto	or, either in	-	
Signed, sealed and delivered in our presence:	L 11	and and sear the day and	i year iiist abc	we written.		
Printed Name: Witness		P.O. Address:			2)	Seal
Printed Name: Witness		P.O. Address:			(5	Seal
STATE OF Florida COUNTY OF						
The foregoing instrument was acknowledged before m	ne this	day of			,	by
who is personally known to me or who has produced					as identification.	
		Printed Nam Notary Publ My Commission Expire	ic			