

Prepared By:

After Recording Return To:

Tax Parcel ID Number:

This space for Recorder's use only

FLORIDA QUIT CLAIM DEED

STATE OF FLORIDA

_____ COUNTY

THIS DEED, executed this _____ day of _____, 20 _____,
between first party, as Grantor,

_____ whose mailing address is

and second party, as Grantee,

_____ whose mailing address is

WITNESSETH, that Grantor, and in consideration of (\$ _____), and
other good and valuable consideration paid by the Grantee, the receipt of which is
hereby acknowledged, does hereby remise, release and forever quitclaim unto the
Grantee, all the rights, title, interest, and claim in or to the following described parcel of land,
and improvements and appurtenances thereto, in _____ County,
Florida, to-wit:

**A complete legal description of the real property being conveyed by this
instrument is attached hereto on page 4 as EXHIBIT A.**



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 first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

IN WITNESS WHEREOF, Grantor has executed and delivered this Quit Claim Deed under seal as of the day and year first above written.

Grantor's Signature

Spouse's Signature (*if married*)

Grantor's Name

Spouse's Name

Address

Address

City, State, and Zip

City, State, and Zip

Witness's Signature

Witness's Signature

Witness's Name

Witness's Name

Witness's Address

Witness's Address

STATE OF FLORIDA)

COUNTY OF _____)

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ day of _____, _____, by _____ who is personally known to me or who has produced _____ as identification.

Notary Public

(SEAL)

My Commission Expires: _____

EXHIBIT A

Legal description of the real property being conveyed by this instrument.