

This document prepared by (and after recording)
return to):)
Name:)
Firm/Company:)
Address:)
Address 2:)
City, State, Zip:)
Phone:)
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Property Appraiser Parcel Identification Number =

QUITCLAIM DEED
(Two Individuals to LLC)

THIS QUITCLAIM DEED, Made the _____ day of _____, 20____, by _____ and _____, Two Individuals, hereinafter referred to as "Grantors", to _____ a Limited Liability Company organized under the laws of the state of _____, hereinafter called "Grantee".

Witnesseth, that the Grantors, for and in consideration of the sum of ten dollars (\$10.00), and other good and valuable consideration, cash in hand paid, the receipt and sufficiency of which is hereby acknowledged, does hereby remise, release, and quitclaim unto Grantee the following lands and property, together with all improvements located thereon, lying in the County of _____, State of Florida, to-wit:

Describe Property of State "SEE DESCRIPTION ATTACHED"

Prior instrument reference: Book _____, Page _____, Document No. _____, of the Recorder of _____ County, Florida.

LESS AND EXCEPT all oil, gas and minerals, on and under the above described property owned by Grantors, if any, which are reserved by Grantors.

SUBJECT to restrictions, reservations, easements, and covenants of record, reference hereto will not serve to reimpose the same.

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 Grantor(s), either in law or equity, to the only proper use, benefit and behalf of the Grantee(s) forever.

Taxes for tax year _____ shall be ☐ prorated between Grantors and Grantee as of the date selected by Grantors and Grantee, or ☐ paid by Grantee, or ☐ paid by Grantors.

WITNESS Grantors hand(s) this the ____ day of _____, 20____.

Signed, Sealed and Delivered
in the presence of *these Witnesses*
(one of whom may be the Notary):

Sign: _____
Witness Signature

Printed Name

Grantor
{Type Name}

Sign: _____
Witness Signature

Printed Name

Sign: _____
Witness Signature

Printed Name

Grantor
{Type Name}

Sign: _____
Witness Signature

Printed Name

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ (date), by
_____ (name(s)), who is personally known to me or who has produced
_____ (type of identification) as identification.

Notary Public

Printed Name: _____

My Commission Expires:

Grantor(s) Name, Address, phone:

Grantee(s) Name, Address, phone:

SEND TAX STATEMENTS TO GRANTEE