

Performance Property Management Services, Inc.
13501 SW 128 St Suite 114C Miami, FL 33186
Telephone: 866-523-5003 Fax: 866-523-5004

| | | | |
|---------------------------|------------|------------------|----------------|
| Order Date: | 07/27/2015 | Folio Number: | 494110-04-2120 |
| Internal Tax Deed Number: | 35801 | Parent Tract No: | NONE |
| Records Through | 07/24/2015 | | |
| Updated Through | 6/8/2016 | | |

PROPERTY LOCATED IN BROWARD COUNTY DESCRIBED AS FOLLOWS:

Lot 14 In Block 174 of Mainland's of Tamarac Lakes Tenth Section as recorded in plat book 68 page 36 of the public records of Broward County, Fla

TO: Records, Taxes & Treasury Division, Delinquent Tax Department, Broward County

Applicant: CAPITAL ONE, NA AS COLLATERAL ASSIGNEE FOR HMF FL D, LLC

Application has been made for Tax Deed on the above referenced property. Pursuant to chapter 197.502 and 197.522 of the Florida Statutes, below are the names and addresses of the persons you are required to notify prior to the sale of the property:

APPARENT TITLE HOLDER & ADDRESS AS INDEXED IN THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA

Instr. # 113425352

AMH FAMILY HOMES, INC.
6011 NW 69 AVENUE
TAMARAC, FL 33321

MORTGAGEE AND ADDRESS OF RECORD AS INDEXED IN THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA

NONE

LIEN HOLDER AND ADDRESS OF RECORD AS INDEXED IN THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA

NONE

NAME AND ADDRESS OF RECORD ON CURRENT TAX ROLL

FOLGAR,EDGAR L
AMH FAMILY HOMES INC
1808 W TERRAMAR DR
LAUDERDALE BY THE SEA FL 33062

NAME AND ADDRESS OF ESCROW AGENT: NONE

NAME AND ADDRESS OF TAX PAYING AGENT: NONE

APPLICATION FOR HOMESTEAD: NONE

GROSS ASSESSMENT: \$172,980.00

NOTE: TAX DEED YEAR:2014 TAX DEED APPLICATION #35801 FACE AMOUNT:\$3,215.61 APPLICANT: CAPITAL ONE, NA AS COLLATERAL ASSIGNEE FOR HMF FL D, LLC

UNPAID OR OMITTED YEARS TAXES (Only Include the Years with Certificates)

| <u>TYPE</u> | <u>TAX</u> | <u>CERTIFICATE</u> | <u>FACE AMOUNT</u> | <u>CERTIFICATE HOLDER</u> |
|-------------|------------|--------------------|--------------------|----------------------------------------------------------|
| I | 2015 | 5120 | \$3790.03 | UMB BANK AS CUST. FOR FARRELL-ROEH LIENS LLLP |
| I | 2013 | 5847 | \$3228.34 | HMF FL E LLC RAI AS CUSTODIAN |
| I | 2012 | 5933 | \$3009.27 | CAPITAL ONE, NA AS COLLATERAL ASSIGNEE FOR HMF FL D, LLC |

This Report is not a Legal Opinion of Title and should not be construed as dealing with the Quality of Title used as a Certified Abstract of Title, Title Insurance Commitment or Title Insurance Policy. Under Florida Statutes Chapter 197. Furthermore no Liability is assumed by PPMS, Inc for any liens and or judgments not filed in the Official Records of Broward County, Florida. PPMS, Inc. should only be liable for the amount of loss suffered by the Broward County Revenue Collection Division, as a result of legal matters filed against them, where such loss is determined to be from PPMS, Inc's errors and omissions in performing its contractual responsibilities to the Broward County Revenue Collection Division, or for any refilling of fees that are required to bring subject property to sale.

BY: *Mitch Wilson*

By: *A. Black*
Authorized Signature

Board of County Commissioners, Broward County, Florida
Finance and Administrative Services Department
RECORDS, TAXES & TREASURY

NOTICE OF APPLICATION FOR TAX DEED NUMBER 35801

NOTICE is hereby given that the holder of the following certificate has filed said certificate for a tax deed to be issued thereon. The certificate number and year of issuance, the description of the property, and the name in which it was assessed are as follows:

Property ID: 494110-04-2120
Certificate Number: 5933
Date of Issuance: 06/01/2013
Certificate Holder: CAPITAL ONE, NA AS COLLATERAL ASSIGNEE FOR HMF FL D, LLC
Description of Property: MAINLANDS OF TAMARAC LAKES
TENTH SEC 68-36 B
LOT 14 BLK 174

Name in which assessed: FOLGAR, EDGAR L TAMARAC LAKES FLORIDA LAND TR
Legal Titleholders: FOLGAR, EDGAR L
TAMARAC LAKES FLORIDA LAND TR
1808 W TERRAMAR DR
LAUDERDALE BY THE SEA, FL 33062

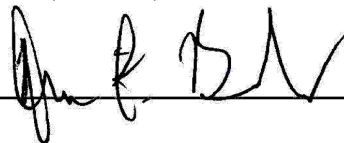
All of said property being in the County of Broward, State of Florida.

Unless such certificate shall be redeemed according to law the property described in such certificate will be sold to the highest bidder on the 19th day of October, 2016. Pre-bidding shall open at 9:00 AM EDT, sale shall commence at 10:00 AM EDT and shall begin closing at 11:01 AM EDT at:

broward.deedauktion.net
**Pre-registration is required to bid.*

Dated this 15th day of September, 2016.

Bertha Henry
County Administrator
RECORDS, TAXES, AND TREASURY DIVISION

By: 

Dana F. Buker
Deputy

This Tax Deed is Subject to All Existing Public Purpose Utility and Government Easements. The successful bidder is responsible to pay any outstanding taxes.

Publish: DAILY BUSINESS REVIEW
Issues: 09/15/2016, 09/22/2016, 09/29/2016 & 10/06/2016
Minimum Bid: 17353.83

**Board of County Commissioners, Broward County, Florida
Records, Taxes, & Treasury**

CERTIFICATE OF MAILING NOTICES

Tax Deed # 35801

**STATE OF FLORIDA
COUNTY OF BROWARD**

THIS IS TO CERTIFY that I, County Administrator in and for Broward County, Florida, did on the 1st day of September 2016, mail a copy of the Notice of Application for Tax Deed to the following persons prior to the sale of property, and that payment has been made for all outstanding Tax Certificates or, if the Certificate is held by the County, that all appropriate fees have been paid and deposited:

**CITY OF TAMARAC
C/O FINANCIAL SERVICES
7525 NW 88 AVE
TAMARAC, FL 33321**

**LEWIS,EARL
6009 NW 69 AVE
TAMARAC FL 33321-5651**

**SAREEN,ARUN K
6008 NW 70 AVE
TAMARAC FL 33321**

**FOLGAR,EDGAR L
6011 NW 69 AVE
TAMARAC FL 33321**

**FOLGAR,EDGAR L
1808 W TERRAMAR DR
LAUDERDALE BY THE SEA FL 33062**

**ULYSSE,CAROLE H/E
ULYSSE,FUCIEN
6006 NW 70 AVE
TAMARAC FL 33321-5656**

**AMH FAMILY HOMES INC
6011 NW 69 AVE
TAMARAC FL 33321**

**AMH FAMILY HOMES INC
1808 W TERRAMAR DR
LAUDERDALE BY THE SEA FL 33062**

THE FOLLOWING AGENCIES WERE NOTIFIED BY INTEROFFICE

**BROWARD COUNTY CODE ENFORCEMENT
PERMITTING LICENSING & PROTECTION DIVISION
ATTN: DIANE JOHNSON
GCW-1 NORTH UNIVERSITY DR
PLANTATION, FL 33324**

**BROWARD COUNTY WATER & WASTEWATER
ATTN: RACHEL FLEURY-CHARLES
2555 W. COPANS RD
POMPANO BEACH, FL 33069**

**BROWARD COUNTY CODE & ZONING
ENFORCEMENT SECTION
PLANNING & REDEVELOPMENT DIV.
ENVIRONMENTAL PROTECTION & GROWTH
MGMT DEPT
ATTN: GORDON MILLER
GCW – 1 NORTH UNIVERSITY DR, MAILBOX 302
PLANTATION, FL 33324**

**BROWARD COUNTY PUBLIC WORKS DEPT
REAL PROPERTY SECTION
ATTN: MARIE HAMMOND
115 S ANDREWS AVE, ROOM 326
FORT LAUDERDALE FL 33301**

**BROWARD COUNTY HIGHWAY CONSTRUCTION &
ENGINEERING DIVISION, RIGHT OF WAY SECTION
ATTN: FRANK J GUILIANO
ONE N. UNIVERSITY DR., STE 300-B
PLANTATION, FL 33324**

**BROWARD COUNTY SHERIFF'S DEPT.
ATTN: CIVIL DIVISION
FT. LAUDERDALE, FL 33315**

I certify that notice was provided pursuant to Florida Statutes, Section 197.502(4)

I further certify that I enclosed with every copy mailed, a statement as follows: 'Warning - property in which you are interested' is listed in the copy of the enclosed notice.

GIVEN UNDER MY HAND AND OFFICIAL SEAL, this 1st day of September 2016 in compliance with section 197.522 Florida Statutes, 1995, as amended by Chapter 95-147 Senate Bill No. 596, Laws of Florida 1995.

SEAL

**Bertha Henry
COUNTY ADMINISTRATOR
Finance and Administrative Services Department
Records, Taxes, & Treasury Division**

By _____
Deputy **Rebecca Leder**

401-316 Revised 05/13

FROM THE COUNTY ADMINISTRATOR, BROWARD COUNTY, FORT LAUDERDALE, FLORIDA

DATE: September 1, 2016

PROPERTY ID # 494110-04-2120 (TD # 35801)

WARNING

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

AS PER FLORIDA STATUTES 197.542, THE PROPERTY AT 6011 NW 69 AVE TAMARAC FL 33321 IS BEING SCHEDULED FOR TAX DEED AUCTION. ONCE THE PROPERTY IS SOLD IT CAN NOT BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW PLEASE CALL FOR MORE INFORMATION.

FLA. STATUTES REQUIRE US TO NOTIFY ALL PROPERTY OWNERS WHO LIVE AROUND THE PROPERTY THAT'S GOING UP FOR SALE. IF YOU DO NOT OWN OR HAVE LEGAL INTEREST IN THIS PROPERTY, PLEASE DISREGARD THIS LETTER.

PAYMENT MUST BE MADE IN CASH, MONEY ORDER OR CASHIER'S CHECK; PERSONAL OR BUSINESS CHECKS ARE NOT ACCEPTED.

AMOUNT NECESSARY TO REDEEM: (See amount below)

MAKE CHECKS PAYABLE TO: BROWARD COUNTY TAX COLLECTOR

*** Amount due if paid by September 30, 2016\$ 13,209.85**

Or

*** Amount due if paid by October 18, 2016\$ 13,368.05**

***AMOUNTS DUE MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE PRIOR TO SUBMITTING PAYMENT FOR REDEMPTION.**

THERE ARE UNPAID TAXES ON THIS PROPERTY AND WILL BE SOLD AT PUBLIC AUCTION ON OCTOBER 19, 2016 UNLESS THE BACK TAXES ARE PAID.

TO MAKE PAYMENT, OR TO RECEIVE FURTHER INFORMATION, CONTACT THE RECORD, TAXES & TREASURY DIVISION, TAX DEED SECTION, 115 S. ANDREWS AVENUE ROOM #A-100, FORT LAUDERDALE, FLORIDA 33301-1895. PHONE: (954) 357-5374

**FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT
www.broward.org/recordstaxestreasury**

BROWARD COUNTY SHERIFF'S OFFICE
P.O. BOX 9507 FORT LAUDERDALE, FLORIDA 33310

RETURN OF SERVICE

Assignment:

SERVE ASAP RTN TO TAX NOTICE TRAY

Service Sheet #

16-041454

BROWARD COUNTY, FL vs. FOLGAR, EDGAR L, ETAL

TD 35801

TAX SALE NOTICE

VS. **COUNTY/BROWARD**

DEFENDANT **10/19/2016**

CASE

TYPE OF WRIT

FOLGAR, EDGAR L &/OR AMH FAMILY HOMES INC

6011 NW 69TH AVE

COURT

HEARING DATE

SERVE

TAMARAC, FL 33321

14279

**BROWARD COUNTY REVENUE-DELINQ TAX SECTION
115 S. ANDREWS AVENUE, ROOM A-100
FT LAUDERDALE, FL 33301**

REBECCA LEDER, SUPV.

17448

Attorney

FOLGAR, EDGAR L &/OR AMH FAMILY HOMES INC

Received this process on

Date

☒ Served

☐ Not Served - see comments

9-9-16

Date

at

0934HRS.

Time

On _____, in Broward County, Florida, by serving the within named person a true copy of the writ, with the date and time of service endorsed thereon by me, and a copy of the complaint, petition, or initial pleading, by the following method:

☐ **INDIVIDUAL SERVICE**

SUBSTITUTE SERVICE:

☐ At the defendant's usual place of abode on "any person residing therein who is 15 years of age or older", to wit:

_____, in accordance with F.S. 48.031(1)(a)

☐ To _____, the defendant's spouse, at _____ in accordance with F.S. 48.031(2)(a)

☐ To _____, the person in charge of the defendant's business in accordance with F.S. 48.031(2)(b), after two or more attempts to serve the defendant have been made at the place of business

CORPORATE SERVICE:

☐ To _____, holding the following position of said corporation _____ in the absence of any superior officer in accordance with F.S. 48.081

☐ To _____, an employee of defendant corporation in accordance with F.S. 48.081(3)

☐ To _____, as resident agent of said corporation in accordance with F.S. 48.091

☐ **PARTNERSHIP SERVICE:** To _____, partner, or to _____, designated employee or person in charge of partnership, in accordance with F.S. 48.061(1)

☐ **POSTED RESIDENTIAL:** By attaching a true copy to a conspicuous place on the property described in the complaint or summons. Neither the tenant nor a person residing therein 15 years of age or older could be found at the defendant's usual place of abode in accordance with F.S. 48.183

1st attempt date/time: _____

2nd attempt date/time: _____

☐ **POSTED COMMERCIAL:** By attaching a true copy to a conspicuous place on the property in accordance with F.S. 48.183

1st attempt date/time: _____

2nd attempt date/time: _____

☒ **OTHER RETURNS:** See comments

COMMENTS:

No Ans. Posted notice on front window

You can now check the status of your writ by visiting the Broward Sheriff's Office Website at www.sheriff.org and clicking on the icon "Service Inquiry"

**SCOTT J. ISRAEL, SHERIFF
BROWARD COUNTY, FLORIDA**

BY:

Nelson Foice
#8354 B.S.

ORIGINAL

FROM THE COUNTY ADMINISTRATOR, BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
PROPERTY ID # 494110-04-2120 (TD # 35801)

WARNING

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

**BROWARD COUNTY SHERIFF'S DEPT
ATTN: CIVIL DIVISION
FT LAUDERDALE, FL 33312**

NOTE

AS PER FLORIDA STATUTES 197.542, THIS PROPERTY IS BEING SCHEDULED FOR TAX DEED AUCTION, AND WILL NO LONGER BE ABLE TO BE REDEEMED. OTHER TAX YEARS MAY BE OWED BUT NOT INCLUDED IN THE AMOUNT BELOW PLEASE CALL FOR MORE INFORMATION.

FLA. STATUTES REQUIRE US TO NOTIFY ALL PROPERTY OWNERS WHO LIVE AROUND THE PROPERTY THAT'S GOING UP FOR SALE. IF YOU DO NOT OWN OR HAVE LEGAL INTEREST IN THIS PROPERTY, PLEASE DISREGARD THIS LETTER.

PAYMENT MUST BE MADE IN CASH, MONEY ORDER OR CASHIER'S CHECK; PERSONAL OR BUSINESS CHECKS ARE NOT ACCEPTED.

AMOUNT NECESSARY TO REDEEM: (See amount below)

MAKE CHECKS PAYABLE TO: BROWARD COUNTY TAX COLLECTOR

* Amount due if paid by September 30, 2016\$ 13,209.85

Or

* Amount due if paid by October 18, 2016\$ 13,368.05

*AMOUNTS DUE MAY BE SUBJECT TO ADDITIONAL FEES. PLEASE CALL (954) 357-5374 FOR THE CORRECT AMOUNT DUE PRIOR TO SUBMITTING PAYMENT FOR REDEMPTION.

THERE ARE UNPAID TAXES ON THIS PROPERTY AND WILL BE SOLD AT PUBLIC AUCTION ON OCTOBER 19, 2016 UNLESS THE BACK TAXES ARE PAID.

TO MAKE PAYMENT, OR TO RECEIVE FURTHER INFORMATION, CONTACT THE RECORD, TAXES & TREASURY DIVISION, TAX DEED SECTION, 115 S. ANDREWS AVENUE ROOM #A-100, FORT LAUDERDALE, FLORIDA 33301-1895. PHONE: (954) 357-5374 OR 5395
FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT

www.broward.org/recordstaxestreasury

PLEASE SERVE THIS ADDRESS OR LOCATION

**FOLGAR, EDGAR L AND/OR AMH FAMILY HOMES INC
6011 NW 69 AVE
TAMARAC FL 33321**

NOTE: THIS IS THE ADDRESS OF THE PROPERTY SCHEDULED FOR AUCTION

Assignment: **SERVE ASAP** Service Sheet # **16-041458**

BROWARD COUNTY, FL vs. FOLGAR, EDGAR L, ET AL

TD 35801

TAX SALE NOTICE

VS. **COUNTY/BROWARD**

DEPENDANT **10/19/2016** CASE

TYPE OF WRIT

COURT

HEARING DATE

**FOLGAR, EDGAR L &/ OR AMH FAMILY HOMES INC 1808 W TERRAMAR DR
LAUDERDALE BY THE SEA, FL 33062**

SERVE

Received this process on

Date

14279

**BROWARD COUNTY REVENUE-DELINQ TAX SECTION
115 S. ANDREWS AVENUE, ROOM A-100
FT LAUDERDALE, FL 33301**

REBECCA LEDER, SUPV.

17448

Attorney

☒ Served

☐ Not Served - see comments

9/9/2016

Date

at 1239

Time

FOLGAR, EDGAR L &/ OR AMH FAMILY HOMES INC

On _____, in Broward County, Florida, by serving the within named person a true copy of the writ, with the date and time of service endorsed thereon by me, and a copy of the complaint, petition, or initial pleading, by the following method:

☐ **INDIVIDUAL SERVICE**

SUBSTITUTE SERVICE:

☐ At the defendant's usual place of abode on "any person residing therein who is 15 years of age or older", to wit:

_____ in accordance with F.S. 48.031(1)(a)

☐ To _____, the defendant's spouse, at _____ in accordance with F.S. 48.031(2)(a)

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CORPORATE SERVICE:

☐ To _____, holding the following position of said corporation _____ in the absence of any superior officer in accordance with F.S. 48.081

☐ To _____, an employee of defendant corporation in accordance with F.S. 48.081(3)

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1st attempt date/time: _____

2nd attempt date/time: _____

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1st attempt date/time: _____

2nd attempt date/time: _____

☒ **OTHER RETURNS:** See comments

COMMENTS: **9/9/2016 AT 1239 POSTED AT FRONT DOOR**

You can now check the status of your writ by visiting the Broward Sheriff's Office Website at www.sheriff.org and clicking on the icon "Service Inquiry"

SCOTT J. ISRAEL, SHERIFF
BROWARD COUNTY, FLORIDA

BY: **Joe Amendot 14932** D.S.

ORIGINAL

FROM THE COUNTY ADMINISTRATOR, BROWARD COUNTY, FORT LAUDERDALE, FLORIDA
PROPERTY ID # 494110-04-2120 (TD # 35801)

WARNING

PROPERTY IN WHICH YOU ARE INTERESTED IS LISTED IN THE ENCLOSED NOTICE

BROWARD COUNTY SHERIFF'S DEPT
ATTN: CIVIL DIVISION
FT LAUDERDALE, FL 33312

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Or

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FOR TAX DEEDS PROCESS AND AUCTION RULES, PLEASE VISIT

www.broward.org/recordstaxestreasury

PLEASE SERVE THIS ADDRESS OR LOCATION

**FOLGAR, EDGAR L AND/OR AMH FAMILY HOMES INC
1808 W TERRAMAR DR
LAUDERDALE BY THE SEA FL 33062**

**NOTE: THIS IS NOT THE ADDRESS OF THE PROPERTY SCHEDULED FOR AUCTION
THIS IS THE ADDRESS OF THE OWNER!**

This instrument Prepared by:
James Lowe
1808 W Terramar Drive
Lauderdale By The Sea, FL 33062
Hollywood, Fla 33020

Folio: 4941 10 04 2120

This Special Warranty Deed,
Executed this 23rd Day of December 2015. By

GL Family Homes, Inc., Trustee of the Tamarac Lakes Florida Land Trust dated
June 17, 2015
Whose mailing address is 1808 W Terramar Drive Lauderdale By The Sea, FL 33062
hereinafter referred to as "Grantor"
to

AMH Family Homes, Inc., A FL Corp
whose address is 1808 W Terramar Drive Lauderdale By The Sea, FL 33062
hereinafter referred to as "Grantee"

(Wherever used herein the terms "Grantor" and "Grantee" shall include singular and plural, heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witneseth, That the said Grantor, for and in consideration of the sum of \$10.00 and other valuable considerations, receipt whereof is hereby acknowledged, by these presents does grant, bargain, sell, alien, release, convey and confirm unto the grantee, all that certain land, situate, lying and being in the County of Broward State of Florida, to-wit:

Lot 14 In Block 174 of Mainland's of Tamarac Lakes Tenth Section as
recorded in plat book 68 page 36 of the public records of Broward
County, Fla

6011 NW 69 AVE Tamarac FL 33321

This deed is being re-recorded to correct a scrivener's error in the Notary section of a previously recorded deed instrument number 113269573 in the Public Records of Broward County Florida.

To Have and To Hold, the same in fee simple forever, together with all tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining. Grantee is taking subject to property taxes for the year 2013 and subsequent years, conditions, reservations, limitations, restrictions, covenants, easements of record, and applicable zoning.

And said Grantor does hereby warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever claiming , by, through or under the Grantor herein, and no others.

In Witness Whereof, The Grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in presence of:

Witness

Rosemary Blank

GL Family Homes, Inc., Trustee of the
Tamarac Lakes Florida Land Trust dated
June 17, 2015

Witness

Andres Aguilera

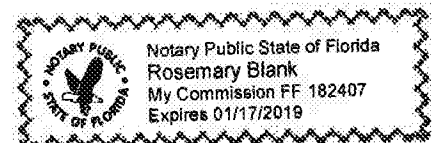
By

James Lowe
James Lowe, President

State of Florida
County of Broward

I hereby certify that on this 23 Day of December 2015, before me, an officer duly authorized in the state and in the county aforesaid to take acknowledgements, James Lowe as President of GL Family Homes, Inc., Trustee of the Tamarac Lakes Florida Land Trust dated June 17, 2015 who is personally known to me, appeared in and who produced a Drivers License as Identification and took an oath, to me known to be the person described in and who on behalf of the executed the foregoing instrument and he acknowledged before me that he executed the same. Witness my hand and official seal in the county and state last aforesaid this 23 day of December 2015.

Rosemary Blank
Notary Public



Prepared by and return to:
Stephen Sperling, Esq
P.O Box 81705
Hollywood, FL 33081

(Space Above This Line For Recording Data)

Special Warranty Deed

This Special Warranty Deed made this 17th day of June, 2015, between AMH Family Homes, Inc, A Fla Corp, whose post office address is 1808 W Terramar Dr, Lauderdale by The Sea, FL 33062, grantor, and GL Family Homes, Inc, Trustee of the Tamarac Lakes Florida Land Trust dated June 17th 2015, grantee: (Whenever 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, trusts and trustees)

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Broward County, Florida, to-wit:

Lot 14 In Block 174 of Mainlands of Tamarac Lakes Tenth Section according to the plat thereof as recorded in plat book 68 at page 36 of the public records of Broward County, Florida of the Public Records of Broward County, Florida,

Parcel Identification Number: 4941 10 04 2120

The Trustee has the power and authority to protect, conserve, sell, lease, convey, encumber or otherwise manage and dispose of real property pursuant to Florida Statute 689.073

Subject to covenants, conditions, restrictions, reservations, limitations, easements and agreements of record, if any; taxes and assessments for the year 2008 and subsequent years; and to all applicable zoning ordinances and/or restrictions and prohibitions imposed by governmental authorities, if any.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and To Hold, the same in fee simple forever, Together with all tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining..

And said grantor does hereby warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever claiming, by, through or under the grantor herein, and no others.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

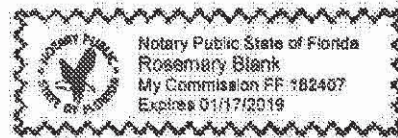
AMH Family Homes, Inc.
Witness Name: Rosemary Blank By James Lowe
Manager
Witness Name: Andres Aguilera

THIS IS AN OFFICIAL COPY

County of Broward
State of Florida

I hereby certify that on this day, before me, an officer duly authorized in the state and in the county aforesaid to take acknowledgments James Lowe as President of AMH Family homes, Inc in and who produced a Drivers license as I.D and took an oath to me known to be the persons described in and who executed the foregoing instrument and he acknowledged before me that he executed the same. Witness my hand and official seal in the county and state last aforesaid this 17th day of June 2015.

Rosemary Blank
Notary Public





7015 3010 0001 7558 7688

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com[®].

OFFICIAL USE

| | |
|--------------------------------------------------------------|----|
| Certified Mail Fee | |
| \$ | |
| Extra Services & Fees (check box, add fee as appropriate) | |
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ |
| <input type="checkbox"/> Adult Signature Required | \$ |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ |

Postmark
Here

Postage

\$

Total P

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Sent To

Street a

City, Sta

TD 35801 OCT 2016 WARNING
FOLGAR,EDGAR L
6011 NW 69 AVE
TAMARAC FL 33321

7015 3010 0001 7558 7695

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- | | | |
|--------------------------------------------------------------|----|--|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | |
| <input type="checkbox"/> Adult Signature Required | \$ | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | |

Postmark
Here

Postage

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To

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Service

Street

City, State, ZIP+4®

TD 35801 OCT 2016 WARNING
AMH FAMILY HOMES INC
6011 NW 69 AVE
TAMARAC FL 33321

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 3010 0001 7558 7701

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com[®].

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- | | | |
|--------------------------------------------------------------|----|--|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | |
| <input type="checkbox"/> Adult Signature Required | \$ | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | |

Postmark
Here

Postage

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Total

\$

Security

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Signature

City, State, ZIP+4[®]

TD 35801 OCT 2016 WARNING
LEWIS, EARL
6009 NW 69 AVE
TAMARAC FL 33321-5651

7015 3010 0001 7558 7718

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

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|--------------------------------------------------------------|----|--|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | |
| <input type="checkbox"/> Adult Signature Required | \$ | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | |

Postmark
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Postage

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Total

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Sent

Street

City, :

TD 35801 OCT 2016 WARNING
FOLGAR, EDGAR L
1808 W TERRAMAR DR
LAUDERDALE BY THE SEA FL 33062

7015 3010 0001 7558 7225

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

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☐ Return Receipt (electronic)

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☐ Certified Mail Restricted Delivery

\$

☐ Adult Signature Required

\$

☐ Adult Signature Required

\$

Postage

\$

Total Postage

\$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

TD 35801 OCT 2016 WARNING
AMH FAMILY HOMES INC
1808 W TERRAMAR DR
LAUDERDALE BY THE SEA FL 33062

Postmark

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 3010 0001 7558 7664

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

| | |
|-------------------------------------------------------------|----|
| Certified Mail Fee | |
| \$ | |
| Extra Services & Fees (check box, add fee as appropriate) | |
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ |
| <input type="checkbox"/> Return Receipt (electronic) | \$ |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ |
| <input type="checkbox"/> Adult Signature Required | \$ |
| <input type="checkbox"/> Adult Signature Restricted | \$ |

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TD 35801 OCT 2016 WARNING
CITY OF TAMARAC
C/O FINANCIAL SERVICES
7525 NW 88 AVE
TAMARAC, FL 33321

City, State, ZIP+4®

7015 3010 0001 7558 7657

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

| | | |
|--------------------------------------------------------------|----|--|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | |
| <input type="checkbox"/> Adult Signature Required | \$ | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | |

Postmark
Here

Postage

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Total Postage

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Sent To

Street and

City, State

TD 35801 OCT 2016 WARNING
SAREEN, ARUN K
6008 NW 70 AVE
TAMARAC FL 33321

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com[®].

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- | | | |
|--------------------------------------------------------------|----|--|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | |
| <input type="checkbox"/> Adult Signature Required | \$ | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | |

Postmark
Here

Postage

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Total P_t

\$

Sent To

Street a_i

City, Sta

TD 35801 OCT 2016 WARNING
ULYSSE, CAROLE H/E ULYSSE, FUCIEN
6006 NW 70 AVE
TAMARAC FL 33321-5656

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

7015 3010 0001 7558 7640

COMPLETE THIS SECTION

Complete items 1, 2, and 3.
 Your name and address on the reverse
 at we can return the card to you.
 Attach this card to the back of the mailpiece,
 on the front if space permits.

TD 35801 OCT 2016 WARNING
 AMH FAMILY HOMES INC
 6011 NW 69 AVE
 TAMARAC FL 33321



9590 9402 1346 5285 4231 11

Article Number (Transfer from service label)

7015 3010 0001 7558 7695

Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------|
| A. Signature X | | <input type="checkbox"/> Agent |
| B. Received by (Printed Name) <i>[Signature]</i> | <input type="checkbox"/> Addressee | |
| C. Date of Delivery <i>9/10</i> | | |
| D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No | | |

3. Service Type

| | |
|------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 35801 OCT 2016 WARNING
LEWIS, EARL
6009 NW 69 AVE
TAMARAC FL 33321-5651



9590 9402 1346 5285 4231 28

2. Article Number (Transfer from reverse) 7015 3010 0001 7558 7701

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Earl Lewis

☐ Agent

B. Received by (Printed Name)

C. Date of Delivery

11/5

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes
☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Registered Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over \$500) Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

| | | |
|----------------------------------------------------------------------------|---------------------|------------------------------------|
| A. Signature | | <input type="checkbox"/> Agent |
| X <i>Bob</i> | | <input type="checkbox"/> Addressee |
| B. Received by (Printed Name) | C. Date of Delivery | |
| | 9/13 | |
| D. Is delivery address different from item 1? <input type="checkbox"/> Yes | | |
| If YES, enter delivery address below: <input type="checkbox"/> No | | |

TD 35801 OCT 2016 WARNING
SAREEN, ARUN K
6008 NW 70 AVE
TAMARAC FL 33321



9590 9402 1346 5285 4230 81

2. Art 7015 3010 0001 7558 7657

| | |
|------------------------------------------------------------------|---------------------------------------------------------------------|
| 3. Service Type | |
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TD 35801 OCT 2016 WARNING
CITY OF TAMARAC
C/O FINANCIAL SERVICES
7525 NW 88 AVE
TAMARAC, FL 33321



9590 9402 1346 5285 4230 98

2. Article Number (Transfer from service label)

7015 3010 0001 7558 7664

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *J. Weatherley* ☐ Agent ☒ Addressee
- B. Received by (Printed Name) *J. Weatherley* ☐ Date of Delivery *8/9*
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type

- | | |
|------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

(PSN 330)

Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

| | | | | | |
|------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------|--|
| A. Signature/ | | B. Received by <i>Printed Name</i> | | C. Date of Delivery | |
|  | |  | |  | |
| <input checked="" type="checkbox"/> Agent | | <input type="checkbox"/> Addressee | | | |

Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

TD 35801 OCT 2016 WARNING
AMH FAMILY HOMES INC
1808 W TERRAMAR DR
LAUDERDALE BY THE SEA FL 33062



9590 9402 1346 5285 4230 43

| | |
|------------------------------------------------------------------|---------------------------------------------------------------------|
| 3. Service Type | |
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

7015 3010 0001 7558 7725

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

TD 35801 OCT 2016 WARNING
FOLGAR, EDGAR L
1808 W TERRAMAR DR
LAUDERDALE BY THE SEA FL 33062



9590 9402 1346 5285 4230 67

2. Article Identification Code: 7015 3010 0001 7558 7718

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Edgar L Folgar C. Date of Delivery 9-9-16
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type

- | | |
|--------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

(Over \$500)

Restricted Delivery

Domestic Return Receipt