

**THIS INSTRUMENT PREPARED BY AND  
RECORD AND RETURN TO:**

CHRISTOPHER H. MARINE, ESQ.  
Gould Cooksey Fennell, P.A.  
979 Beachland Boulevard  
Vero Beach, FL 32963  
(772) 231-1100

Recording: / 8.50  
Deed Stamps: 315.00  
Total:

Property Appraiser's Parcel  
Identification No.:  
32-39-25-00009-0002-00100/0

**SPECIAL WARRANTY DEED**

**THIS SPECIAL WARRANTY DEED** Made the *22<sup>nd</sup>* day of December, A.D. 2008 by **GIBBFLIN, L.L.C., a Florida limited liability company**, whose address is Post Office Box 3989, Vero Beach, Florida 32964 hereinafter called the **GRANTOR**, to **1000 37<sup>th</sup> PLACE, LLC, a Florida limited liability company**, whose address is Post Office Box 3989, Vero Beach, Florida 32964, hereinafter called the **GRANTEE**:

(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 the **GRANTOR**, for and in consideration of the sum of Ten Dollars (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the **GRANTEE**, all that certain land situate in Indian River County, Florida, viz:

**Unit 100, Building B of 11th Circle Medical Center Condominium, according to the Declaration of Condominium of 11th Circle Medical Center Condominium, dated October 17, 2006 and recorded in O.R. Book 2090, Page 2094, of the public records of Indian River County, Florida. TOGETHER WITH all appurtenances thereto, including an undivided interest in the common elements of said condominium as set forth in the Declaration.**

**Together with exclusive right of use of Parking Spaces identified as G-13 and G-14 in the above Declaration of Condominium.**

**Subject to provisions, restrictions and obligations in the Declaration of Condominium and real estate taxes for the current year, and other easements, restrictions, reservations and rights of way of record, if any, but this provision shall not operate to reimpose the same.**

**TO HAVE AND TO HOLD**, the same in fee simple forever.

**TOGETHER** with all tenements, hereditaments and appurtenances thereto belonging or in anyway appertaining.

**GRANTOR COVENANTS** with **GRANTEE** that **GRANTOR** has good right and lawful authority to sell and convey the property and **GRANTOR** warrants title to the property for any acts of **GRANTOR** and will defend the title against lawful claims of all persons claiming by, through, or under **GRANTOR**.

**THIS DEED HAS BEEN PREPARED BY THE ABOVE NOTED PARTY WITHOUT BENEFIT OF ABSTRACT OR TITLE EXAMINATION. THE PREPARER ASSUMES NO RESPONSIBILITY FOR THE EXISTENCE OF LIENS, CLAIMS OR ENCUMBRANCES OF ANY NATURE OF RECORD, OR WHICH MAY EXIST AGAINST THE PROPERTY.**

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

Signed, sealed and delivered in the presence of:

*Deborah J. Matthey*

Printed Name: Deborah J. Matthey

*Carol K. Wilcox*

Printed Name: CAROL K. WILCOX

GIBBFLIN, L.L.C., a Florida limited liability company

By: *Robert M. Gibb*  
ROBERT M. GIBB  
President

(Seal)

STATE OF FLORIDA

COUNTY OF INDIAN RIVER

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared **ROBERT M. GIBB**, well known to me and personally known to me to be the President of **GIBBFLIN, L.L.C., a Florida limited liability company**, named as Grantor in the foregoing deed and that he acknowledged executing the same in the presence of two subscribing witnesses freely and voluntarily under authority duly vested in him by said limited liability company and that the seal affixed thereto is the true seal of said limited liability company and who did take an oath.

WITNESS my hand and official seal in the county and state last aforesaid, this 22nd day of December, 2008.

*Carol K. Wilcox*  
Notary Public  
Printed Name: CAROL K. WILCOX  
Commission No.: \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_  
(Notary Seal)

