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This document prepared by:
Kimberly Kraengel for
Kalogianis Law Firm
7236 S.R. 52 Suite 14
Bayonet Point, FL 34667
Transfer Amount: \$40,000.00
Return to:
Swarja Lamba
5657 Westshore Dr.
New Port Richey FL
34652

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2010007993 LORINDA 2719/1572

OFFICIAL RECORDS BK: 2719 PG: 1572

2-2010007993-1

02/12/2010 3:48PM # Pages 1 Filed & Recorded in Official Records of HERNANDO COUNTY CLERK OF COURT KAREN NICOLAI

RECORDING FEES \$ 10.00
DEED DOC STAMP \$ 280.00
02/12/2010 Deputy Clk

WARRANTY DEED

THIS INDENTURE, made this day of February, 2010, between Rajender S. Lamba, MD, PA, doing business as Your Family Doctor Clinic, of the County of Hernando, State of Florida, Grantor, whose post office address is 13028 County Line Rd., Hudson, FL 34667 and Swaraj Lamba, a married woman, whose post office address is 5657 Westshore Dr., New Port Richey, FL 34652, Grantee.

WITNESSETH, that the Grantor, for and in consideration of the sum of Ten and No/100 Dollars (\$10.00), and other good and valuable consideration to Grantor in hand paid by 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 the County of Hernando, State of Florida, to wit:

Lot 3, Block 245, SPRING HILL, UNIT 5, according to the map or plat thereof, as recorded in Plat Book 7, Pages 96-107, Public Records of Hernando County, Florida.

Parcel Identification Number: R32-323-17-5050-0245-0030

Subject to any restrictions, reservations and easements of record, if any, and taxes subsequent to 2009

To have and to hold, the same, in fee simple forever.

The Grantor does hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons, whomsoever, that said land if free of all encumbrances.

IN WITNESS WHEREOF, the Grantor(s) has/have hereunto set his hand(s) and seal(s) the day and year first above written.

Signed, sealed and delivered in our presence:

Witness:

Witness:

STATE OF FLORIDA COUNTY OF PASCO Your Family Doctor Clinic,

By, Rajender S. Lamba, MD, PA 13028 County Line Road

Hudson, FL 34667

The foregoing instrument was acknowledged before me as a witness and a notary, this day of February, 2010 by Rajender S. Lamba, who is/are personally known to me or has produced identification in the form of A- Olobo S. L.

Notary:

My commission expires:

I hereby certify that I prepared this instrument for information given to me by the parties hereto. I do not guarantee either marketability of title or accuracy of description as I did not examine the title of the property involved.

A -Follywest 277 Commence DD 600027 Follow Sop 10, 10 2011

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