

THIS INSTRUMENT PREPARED BY
AND PLEASE RETURN TO"

City of Marianna
Post Office Box 936
2895 Jefferson Street
Marianna, Florida 32446
Telephone: (850) 482-4353

SATISFACTION OF ASSESSMENT LIEN

KNOW ALL MEN BY THESE PRESENTS, That City of Marianna, Florida the owner and holder of a certain Assessment Lien against Phyllis Ann Holland, bearing the date of the 1st day of August, 2006, recorded in O.R. Book 1096, at Page 0914, in the Office of the Clerk of Circuit Court of Jackson County, Florida; which property was subsequently sold to James B. and Mary F. Meyer by tax deed bearing the date of the 20th day of August, 2008, recorded in O.R. Book 1206, at Page 0428, in the Office of the Clerk of Circuit Court of Jackson County, Florida; which property was subsequently sold by a warranty deed to Jeremiah and Catherine Tarver by tax deed bearing the date of the 5th day of October, 2022, recorded in O.R. Book 1765, at Page 0836, in the Office of the Clerk of Circuit Court of Jackson County, Florida; and does hereby acknowledge satisfaction thereof, and directs the Clerk of said Court to cancel the same record.

WITNESS my hand and seal this 4th day of April, 2023.

Signed, Sealed and Delivered
in the Presence of:

First Witness Signature

Printed or Typed Name of First Witness

Second Witness Signature

Printed or Typed Name of Second Witness

CITY OF MARIANNA, FLORIDA

By _____

Its _____

State of Florida
County of Jackson

THE FOREGOING INSTRUMENT was acknowledged before me on this the ____ day of _____, 2023, by _____, who is () personally known to me or () produced a valid _____ Drivers License as identification and who did not take an oath.

NOTARY PUBLIC

Printed Name: _____
State of Florida at Large
Commission Number:
Commission Expires: