

Prepared by and return to:
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File Number: **2025-158**
Will Call No.:

MICHELLE R. MILLER, CLERK OF THE CIRCUIT COURT
SAINT LUCIE COUNTY
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OR BOOK 5451 PAGE 2356 - 2357 Doc Type: DEED
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Quit Claim Deed

This Quit Claim Deed made this 20 day of **March, 2026** between **RAYMOND MICHAEL KELLS**, a single man, whose address is 481 SW Voltair Terrace, Port Saint Lucie, FL 34984, grantor, and, **EKIM ENTERPRISES LLC**, a Florida Limited Liability Company, whose post office address is 1892 SW Biltmore St, Port Saint Lucie, FL 34984, 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 **TEN AND NO/100 DOLLARS (\$10.00)** and other good and valuable consideration to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, does hereby remise, release, and quitclaim to the said grantee, and grantee's heirs and assigns forever, all the right, title, interest, claim and demand which grantor has in and to the following described land, situate, lying and being in **St. Lucie County, Florida** to-wit:


Lot 15, Block 626, PORT ST. LUCIE SECTION THIRTEEN, according to the Plat thereof, as recorded in Plat Book 13, Page 4, Public Records of St. Lucie County, Florida.

Parcel Number: 3420-560-2369-000-8

To Have and to Hold, the same together with all and singular the appurtenances thereto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of grantors, either in law or equity, for the use, benefit and profit of the said grantee forever.

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:



Witness
Printed Name: Roselynn Rapozo
P.O. Address: 4831 KUHIO HWY
KAPAA HI 96746



RAYMOND MICHAEL KELLS

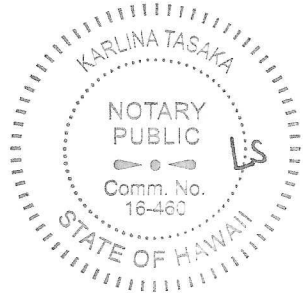


Witness
Printed Name: JOSH GOLDMAN
P.O. Address: 4831 KUHIO HWY
KAPAA HI 96746

State of Hawaii
County of Kaunai

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this 20 day of March, 2026 by RAYMOND MICHAEL KELLS who is personally known or has produced a driver's license as identification.

[Seal]



Karlina Tasaka
Notary Public
Print Name: Karlina Tasaka
My Commission Expires: 04.24.2028

Date: 3-20-26 # Pages: 2
Name: Karlina Tasaka 5 Circuit
Doc. Description: Quit claim

Karlina Tasaka
Notary Signature
NOTARY CERTIFICATION

