STATE OF INDIANA AKE COUNTY FILED FOR RECORD

2005 052877

2005 JUN 27 PM 2: 30

MICHAEL A. BROWN RECORDER

QUITCLAIM DEED

THIS QUITCLAIM DEED, Executed this

5 th

day of JANUARY,

2004 (year),

by first party, Grantor,

MADELINE NICHOLS

whose post office address is

PO BOX 2422 GARY, IN 46403

to second party, Grantee,

OCU GLORY INVESTORS LLC

O BOX 11639, Merrillville, IN 46411-1639 whose post office address is

This Document is the property of

WITNESSETH, That the said first party, for good consideration and for the sum of

) paid by the said second party, the receipt whereof Dollars (\$10.00 is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of,

Lake

State of

Indiana

to wit:

Key Number: 25-46-0399-0039

Common Address: 900 WEST 39TH AVE. City, State, Zip: Gary, IN 46408

RED OAK ADDITION TO TOLLESTON, LOTS 46 AND 48 BLOCK 7

Mail Tax Bills To: GLORY INVESTORS LLC.

PO BOX 11639

Merrillville, IN 46411-1639

DULY ENTERED FOR TAXATION SUBJECT TO

[Signatures on following page.]

JUN 27 2005

AHSTEPHEN R. STIGLICH LAKE COUNTY AUDITOR

002563

Initials of

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day		
and year first above written. Signed, sealed Signature of Witness	and delivered in presence of: Signature of First Party, Grantor	hole
Print name of Witness	Print name of First Party	chols
Signature of Witness	Signature of First Party, Grantor	
Print name of Witness	Print name of First Party	
personally known to me (or proved to person(s) whose name(s) is/are subscribe he/she/they executed the same in his/her.	he on the basis of satisfactory evidence to the within instrument and acknowledged heir authorized capacity(ies), and that by he (s), or the entity upon behalf of which the county Recorder!	d to me that nis/her/their
Signature of Notary Commission applies W15/20 (Seal)		Produced ID
	Print Name of Preparer Pox 11639 Merc Address of Preparer Page 2 of 2.	Mille, IN 46411
	Initials	of First Party

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AHAAAPAQ