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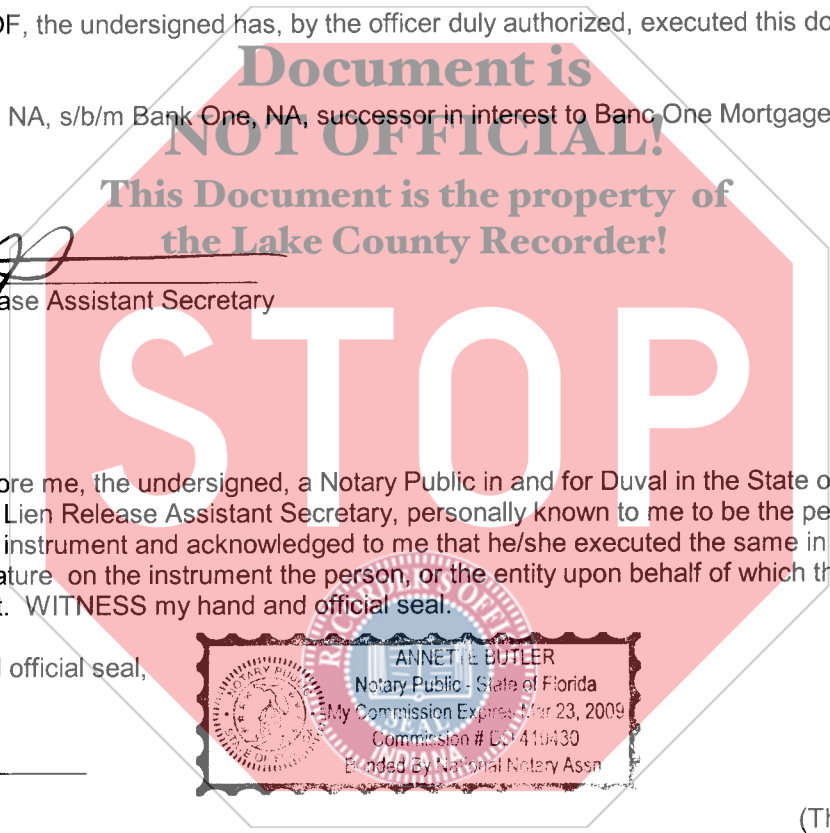
**Satisfaction of Mortgage**

WASHINGTON MUTUAL - CLIENT 150 #:8475114644 "PACE" Lender ID:C32/001/0814634095 Lake, Indiana PIF: 05/22/2007  
KNOW ALL MEN BY THESE PRESENTS that JPMorgan Chase Bank, NA, s/b/m Bank One, NA, successor in interest to Banc One Mortgage Corp., holder of a certain Mortgage to secure the amount of \$54,000.00 whose parties, dates and recording information are below, does hereby acknowledge that it has received full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said Mortgage.

Original Mortgagor: RODNEY L PACE AND EUNICE O PACE, HUSBAND AND WIFE  
Original Mortgagee: BANC ONE MORTGAGE CORPORATION  
Dated: 03/04/1994 Recorded: 03/11/1994 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 94018680, In the offices of the County Recorder of Lake County, in the State of Indiana  
Property Address: 4383 WASHINGTON ST, GARY, IN 46408-3355

IN WITNESS WHEREOF, the undersigned has, by the officer duly authorized, executed this document.

JPMorgan Chase Bank, NA, s/b/m Bank One, NA, successor in interest to Banc One Mortgage Corp.  
On May 24th, 2007

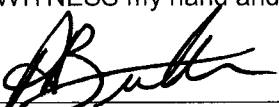


By:   
Jocelyn Tate, Lien Release Assistant Secretary

STATE OF Florida  
COUNTY OF Duval

On May 24th, 2007, before me, the undersigned, a Notary Public in and for Duval in the State of Florida, personally appeared Jocelyn Tate, Lien Release Assistant Secretary, personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument. WITNESS my hand and official seal.

WITNESS my hand and official seal,

  
Notary Expires: / /



(This area for notarial seal)

This instrument was prepared by: Annette Butler, WASHINGTON MUTUAL BANK, FA , PO BOX 45179, JACKSONVILLE, FL 32232-5179 1-866-926-8937

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. Annette Butler.

When Recorded Return To:  
, WASHINGTON MUTUAL PO BOX 45179, JACKSONVILLE, FL 32232-5179

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P.D.M.  
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