STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2008 045085

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MICHAEL A. BROWN RECORDER

REVOCATION AND NOTICE OF REVOCATION OF LIVING WILL DECLARATION, HEALTH CARE DURABLE POWER OF ATTORNEY, APPOINTMENT OF HEALTH CARE REPRESENTATIVE and DURABLE POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS that I, VIRGINIA R. CANADY, hereby revoke unconditionally and for all purposes that certain Living Will Declaration, Health Care Durable Power of Attorney, Appointment of Health Care Representative and Durable Power of Attorney given by me, to my son, LAWRENCE M. CANADY, as my Health Care Representative and/or Attorney-in-Fact and to my granddaughter, MICHELE L. FREEMAN, as successor Health Care Representative and/or Attorney-in-Fact, dated and acknowledged on July 9, 2001, but unrecorded.

This instrument shall serve as notice to all interested persons and to the world that the aforesaid documents are now revoked, void, of no further force and effect, and that I will no longer be bound by any thing. act or deed done for me, on my behalf or in my name, place or stead under the authority of said documents.

WITNESS my hand this 13th day of June, 2008.

Document is

STATE OF INDIANA

)) SS: NOT OFFICIAL!

COUNTY OF LAKE

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Before me, the undersigned, a Notary Public in and for Lake County, State of Indiana, personally appeared VIRGINIA R. CANADY and acknowledged the execution of the above and foregoing instrument on June 13, 2008.

My Commission Expires: 04/27/2016

Kathryn M. Murphy - Notary Public

Resident of Lake County

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.

Michael D. Dobosz, Attorney at Law

THIS INSTRUMENT PREPARED BY:

Michael D. Dobosz, Esq. (#14539-45)

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