

2008 064271

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MICHIGANO TITLE INSURANCE COMPANY
RECORDER

TERMINATION OF LEASE

412 02008 4121

This Termination of Lease ("Termination") is made effective as of September 8, 2008 ("Effective Date") by 9030A Columbia Ave, LLC ("Lessor"), and Orthopaedic Associates of Munster, Inc. a/k/a Orthopedic Associates of Munster, Inc. ("Lessee").

Lessor and Lessee entered into a Lease dated July 12, 2002 ("Lease") for the property commonly known as 9030A Columbia Avenue, Munster, Indiana and legally described on attached Exhibit "A" as evidenced by a Memorandum of Lease dated July 12, 2002, and recorded July 18, 2002, as Document No. 2002-064575.

Lessor and Lessee hereby terminate the Lease as of the Effective Date. Lessor and Lessee acknowledge that there are no outstanding obligations due either party under the Lease and each party releases and discharges the other party from any and all claims, demands, causes of action, rights, damages, and compensation, known or unknown, arising under the Lease.

This Termination shall bind and inure to the benefit of the parties and their respective legal representatives, heirs, successors, and assigns. This Termination constitutes the entire agreement of the parties, all prior negotiations and agreements, whether written or oral, having been merged into this Termination.

This Termination has been executed by the parties effective as of the Effective Date.

9030A COLUMBIA AVE, LLC

ORTHOPAEDIC ASSOCIATES OF
MUNSTER, INC a/k/a ORTHOPEDIC
ASSOCIATES OF MUNSTER, INC.

By: _____
Prasit Sri
Its: Manager



By: _____
Prasit Sri
Its: President

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QB

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

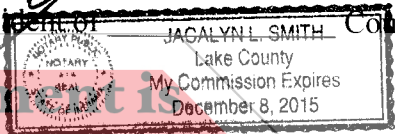
Before me, a Notary Public in and for said County and State, personally appeared Prasit Sri, the Manager of 9030A Columbia Ave, LLC, who acknowledged the execution of the foregoing Termination of Lease, and who, having been duly sworn, stated that the representations contained in it are true.

Witness my hand and Notary Seal this 8 day of September, 2008.

My Commission Expires:

[Handwritten Signature]

_____, Notary Public
Resident of _____ County, Indiana

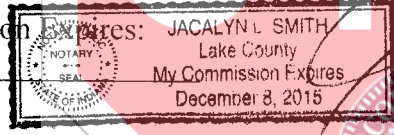


STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Before me, a Notary Public in and for said County and State, personally appeared Prasit Sri, the President of Orthopaedic Associates of Munster, Inc. a/k/a Orthopedic Associates of Munster, Inc., who acknowledged the execution of the foregoing Termination of Lease, and who, having been duly sworn, stated that the representations contained in it are true.

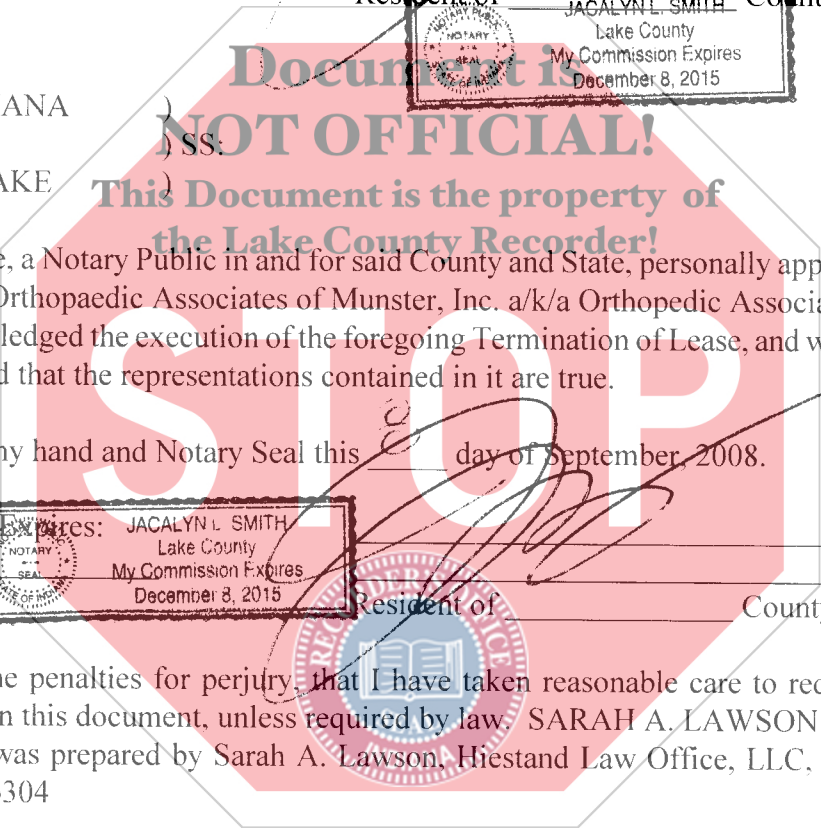
Witness my hand and Notary Seal this 8 day of September, 2008.

My Commission Expires:



_____, Notary Public
Resident of _____ County, Indiana

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. SARAH A. LAWSON
This instrument was prepared by Sarah A. Lawson, Hiestand Law Office, LLC, 117 Broadway, Chesterton, IN 46304



**EXHIBIT "A"
TO
TERMINATION OF LEASE**

Legal Description

Units 9030A, 9034A, 9034B, 9050A and 9050B, Sandridge Professional Office Center, Munster Indiana, a Horizontal Property Regime, recorded July 12, 1982 as Document Nos. 674300 and 674301, in the Recorder's Office of Lake County, Indiana, together with the undivided interest in the common elements appertaining thereto.

