2008 066127

STATE OF INDIANA FILED FOR RECORD

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MICHAEL A. BROWN RECORDER

Satisfaction of Mortgage

LoanCare Servicing Center, Inc. #:2436590 "HINDS" Lender ID:491568/1651681046 Lake, Indiana KNOW ALL MEN BY THESE PRESENTS that FREEDOM MORTGAGE CORPORATION, holder of a certain Mortgage to secure the amount of \$47,500.00 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: MICHAEL A HINDS AND CATHERINE A HINDS HUSBAND AND WIFE

Original Mortgagee: BANK O HIGHLAND

Dated: 08/20/1985 Recorded: 08/28/1985 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 817764, In the

offices of the County Recorder of Lake County, in the State of Indiana

Property Address: 246 FAIRBANKS, MUNSTER, IN 46321

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

Jocument is

FREEDOM MORTGAGE CORPORATION

On August 29th, 2008

This Document is the property of the Lake County Recorder!

KIM BIGHAM, Vice-Presiden

STATE OF Virginia COUNTY OF Suffolk City

ON August 29th, 2008, before me, SHEQUITA BLOW, a Notary Public in and for the City of Suffolk, State of Virginia, personally appeared KIM BIGHAM, Vice-President, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WHINESS my hand and official seal.

SHEQUITA BLOW

Notary Expires: 06/30/2011 #7156421

(This area for notarial seal)

463666699

This instrument was prepared by: Shequita Blow, LoanCare Servicing Center, Inc PO Box 8068, Virginia Beach, VA 23450 1-800-274-6600

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. Shequita Blow. When Recorded Return To:

Release Department, LoanCare Servicing Center, Inc PO Box 8068, Virginia Beach, VA 23450

*SLB*SLBLCSV*08/29/2008 04:19:41 PM* LCSV01LCSVCONVXXXXXXXXXXXX2436590* INLAKE* 2436590 INSTATE_MORT_REL *SLB*SLBLCSV*