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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

LF298-04

2009 029790

2009 MAY -6 PM 1:21

MICHAEL A. BROWN  
RECORDER

### QUITCLAIM DEED

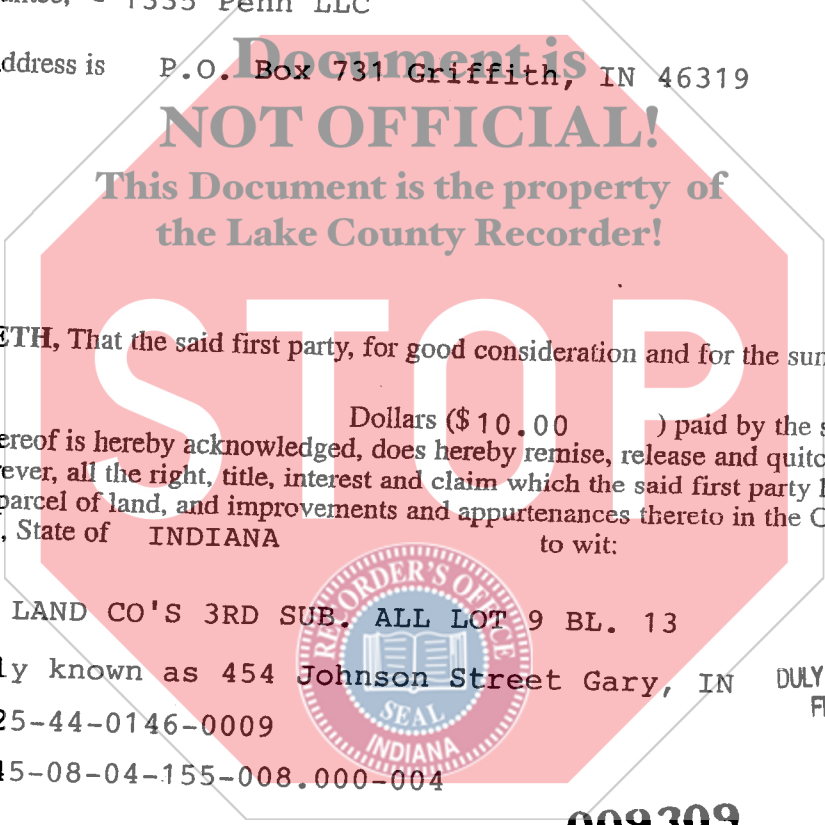
THIS QUITCLAIM DEED, executed this 27 day of February, 2009 (year).

by first party, Grantor, Michael John Sabo

whose post office address is P.O. Box 731 Griffith, IN 46319  
641 N. Arbogast Griffith, IN 46319

to second party, Grantee, 1335 Penn LLC

→ whose post office address is P.O. Box 731 Griffith, IN 46319



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

TEN Dollars (\$10.00) paid by the said second party, the receipt whereof 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:

RESUB. GARY LAND CO'S 3RD SUB. ALL LOT 9 BL. 13

More commonly known as 454 Johnson Street Gary, IN

TAX ID 001-25-44-0146-0009

PARCEL NO. 45-08-04-155-008.000-004

DULY ENTERED FOR TAXATION SUBJECT TO FINAL ACCEPTANCE FOR TRANSFER

MAY 06 2009

009309

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

18w  
6889  
RM

IN WITNESS WHEREOF, The said first party has signed and sealed these presents the day and year first above written. Signed, sealed and delivered in presence of:

Signature of Witness

Print name of Witness

Signature of Witness

Print name of Witness

*[Handwritten Signature]*

Signature of First Party

*Michael John Sabo*

Print name of First Party

Signature of First Party

Print name of First Party

State of INDIANA

County of

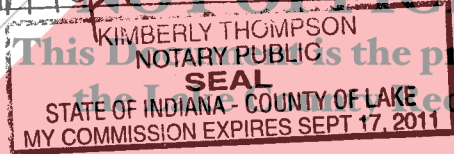
On

before me, a Notary Public

appeared MICHAEL JOHN SABO 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(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.

*[Handwritten Signature]*

Signature of Notary



Affiant  Known  Produced ID Type of ID

(Seal)

State of County of On

before me,

appeared 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(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal.

Signature of Notary



Affiant  Known  Produced ID Type of ID

(Seal)

"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."  
PREPARED BY: *[Handwritten Signature]*

Signature of Preparer

Print Name of Preparer

Address of Preparer