STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2010 061194

2010 OCT 20 PM 3: 18

MICHELL HAJMAN BECORDER

SWORN STATEMENT AND NOTICE OF INTENTION TO HOLD MECHANIC'S LIEN

GRANTEE:

Three Springs Development, Inc.

434 Brighton Ln. Dyer, IN. 46311

and all others concerned.

YOU ARE HEREBY NOTIFIED that I (we) intend to hold a mechanic's lien on the following described real estate:

Three Springs Addition, Phase 2 Lot 133 in the Office of the Auditor of Lake County, Indiana Property # 45-11-33-479-009.000-035

Commonly know as: 10055 Wisteria Ln., St. John, Indiana

Together with all of the improvements there on the amount claimed by lie nor for which he holds the above named persons liable is \$10,908.10 (Ten thousand nine hundred and eight dollars 10/00) and is for work done and/or materials furnished by leinor for the improvement of the above described real estate within the last sixty (60) days. The undersigned individually executing this instrument, having been duly sworn upon his oath, under the penalties of perjury hereby states that Claimant intends to hold a Mechanic's Lien upon the above described real estate and that the facts and matters set forth in the foregoing statement are true and correct.

EXECUTED this 20th day of October, 2010

Von Tobel/Corporation
An Indiana Corporation

(Owner, Partner or Officer)

Peter L. Lawson

751 E. U.S 30 / P.O. BOX 465

Schererville, IN 46375

STATE OF INDIANA COUNTY OF LAKE

) SS

Before me, a Notary Public in and for said County and State, personally appeared Peter L.Lawson as Manager of Von Tobel Corporation and being duly sworn upon his oath says he is the person who executed the foregoing notice of mechanic's lien, that he has read the same and that the statements contained therein are true and correct.

WITNESS my hand and notarial seal this 20th of October, 2010

Janet F. Hardiman

A Resident of Lake County, IN

My commission expires: June 10, 2016

THIS INSTRUMENT PREPARED BY: Janet F. Hardiman, Von Tobel Corporation

751 E. US RT. 30, PO Box 465, Schererville, IN 46375

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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.

AMOUNT \$ _____ CHARGE _____ CHECK #____

OVERAGE _____

NON - COM _____

CLERK _____