STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2010 075126

2010 DEC 20 PM 12: 15

MICHELLE R. FAJMAN RECORDER

THIS FORM HAS BEEN PREPARED FOR USE IN THE STATE OF INDIANA BY LAWYERS ONLY. THE SELECTION OF A FORM OF INSTRUMENT, FILLING IN BLANK SPACES, STRIKING OUT PROVISIONS, AND INSERTION OF SPECIAL CLAUSES, MAY CONSTITUTE THE PRACTICE OF LAW WHICH SHOULD ONLY BE DONE BY A LAWYER.

MAIL TAX BILLS TO: 436 Softwood Drive

Hobart, IN 46342

Key No.

Unit No.

45-08-36-255016.000-018

QUITCLAIM DEED

THIS INDENTURE W	ITNESSETH, that		STE	EVE ZAHARIAS			
GRANTOR(S) of		LAKE			County in the State of	INDIANA	
QUITCLAIM(S) to							
GRANTEE(S) of		LAKE			tenants in common County in the State of		
in consideration of On acknowledged, the fol						vhich are hereby the State of Indiana	ı:
Plat Book 3 Indiana. 3 in Miscella Covenants a record 658 assessments	31, page 8, Subject to eaneous Recorappearing of Page 30, as.	in the easemen and 658, for record sub	Officats of Page of on the Page of the Pag	ce of the R record as 30, and su the recorde to any muni	plat thereonecorder of I shown by plat bject to Resid plat and cipal improves, Indiana	Lake County at of Subdi strictive in Miscella vement	vision
(Signature)) www.			(Signature)	DULY ENTERED FOR TINAL ACCEPTAN	TAXATION SUBJECT TO CE FOR TRANSFER	
(Printed Name)				(Printed Name)		2 0 2010	
(Signature)				(Signature)	PEGGY HOL LAKE COU	INGA KATONA NTY AUDITOR	
(Printed Name)			· · · · · · · · · · · · · · · · · · ·	(Printed Name)			
STATE OF INDIANA, COU		ike		SS,		anD	
Before me, the undersig	ned, a Notary Public in a and a	and for said Co acknowledged	ounty and Sto the execution	ate, this <u> </u>	f September. In witness whereof, I ha	personally appear ve hereunto subscribed	red: 'my name and
affixed my official seal.		,		Mil	-		•
My commission expires:		Signature	-	ag DUR	O I	CARME	N J.T. VEGA
Resident of	County	Printed	CARME.	N VEDA	,Notary	blio A Partel	County Ssion Expires
This instrument prepared b	MICHAEL A. SA	ARAFINAttorne	y at Law, At	torney No. 26916	1-45	Septemb	er 14, 2017

1000 EAST 80TH PLACE SUITE 415 NORTH MERRILLVILLE, INDIANA 46410

MAIL TO:

"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:

EXEMPT TRANSACTION - TRANSFER FOR NO CONSIDERATION

5486

212 C3/