STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

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Release of Mortgage
LOANCARE, A DIVISION OF FNF SERVICING, INC #:2615300 "KOPKA" Lender ID:491/1683862290 Lake, Indiana MERS #: 100021800038564650 VRU #: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC, AS NOMINEE FOR THE BENEFICIAL OWNER WASHTENAW MORTGAGE COMPANY, holder of a certain Mortgage to secure the amount of \$71,500.00 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: JEFFREY A KOPKA AND MICHELLE D KOPKA HUSBAND AND WIFE

Original Mortgagee: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC AS NOMINEE FOR

WASHTENAW MORTGAGE COMPANY

Dated: 11/07/2002 Recorded: 11/22/2002 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 2002 107556,

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

Property Address: 1111 HARRISON STREET, LOWELL, IN 46356

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

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC, AS NOMINEE FOR THE BENEFICIAL OWNER WASHTENAW MORTGAGE COMPANY

On December 10th, 2010

REGINA WHITE, Vice-President

STATE OF Virginia

COUNTY OF Virginia Beach City

ON December 10th, 2010, before me, SHEQUITA BLOW, a Notary Public in and for the City of Suffolk, State of Virginia, personally appeared REGINA WHITE, 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.

WITNESS my hand and official seal,

SHEQUITA BLOW

Notary Expires: 06/30/2011 #7156421

(This area for notarial seal)

This instrument was prepared by: Crystal Davis, LOANCARE, A DIVISION OF FNF SERVICING, 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. Crystal Davis.

When Recorded Return To:

Release Department, LOANCARE, A DIVISION OF FNF SERVICING, INC PO Box 8068, Virginia Beach, VA 23450

*CAD*CADLCSV*12/10/2010 08:25:47 AM* LCSV01LCSV000000000000000034485* INLAKE* 2615300 INSTATE_MORT_REL *CAD*CADLCSV*

AMOUNT \$ 10 CHECK # OVERAGE_

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