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MICHAEL J. FAJMAN  
RECORDER

**RELEASE OF LIEN**

For a valuable consideration, the receipt for which is hereby acknowledged, a certain lien existing in favor of LAKES OF THE FOUR SEASONS PROPERTY OWNERS' ASSOCIATION, INC., 1048 Lake Shore Drive, Crown Point, IN 46307 and against:  
Robert J. & Rosemarie A. Dado  
3499 Marine Dr.  
Crown Point, IN 46307

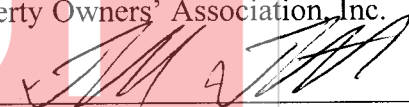
on the following described real estate, to-wit:

Lot Numbered **270**, in Lakes of the Four Seasons, Unit No. **4**, as shown on Plat Book **38**, Page **3**, in the Recorder's Office of Lake County, Indiana; Commonly known as 3499 Marine Drive, Crown Point, IN

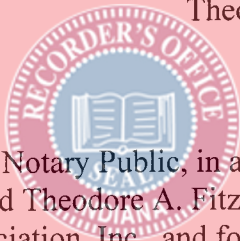
pursuant to a written notice of intention to hold lien filed in the Office of the Recorder of Lake County, State of Indiana, and recorded as Instrument Number **2008 054996** on the 31st day of July, 2008, in said County is hereby declared fully satisfied and released this 15<sup>th</sup> day of June, 2012.

The release of lien shall in no way affect the rights of LAKES OF THE FOUR SEASONS PROPERTY OWNERS' ASSOCIATION, INC., to file a lien against the hereinabove described real estate for any assessments which accrue subsequent to the date of the filing of the hereinabove described lien.

Lakes of the Four Seasons  
Property Owners' Association, Inc.


By:   
Theodore A. Fitzgerald, Attorney in Fact

STATE OF INDIANA     )  
                                  ) SS:  
COUNTY OF PORTER    )



Before me, the undersigned, a Notary Public, in and for said County and State, this 15th day of June, 2012, personally appeared Theodore A. Fitzgerald Attorney in Fact for Lakes of the Four Seasons Property Owners' Association, Inc., and for and on its behalf acknowledged the execution of the above and foregoing release.

Witness my hand and notarial seal.

  
Joanne Garrett-Hansen Notary Public  
Resident County: Porter

My Commission Expires: November 8, 2014

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.



This Instrument prepared by : Theodore A. Fitzgerald, P.O. Box 98, Hebron, IN

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AMOUNT \$ 12.00  
CASH \_\_\_\_\_ CHARGE \_\_\_\_\_  
CHECK# 3978  
OVERAGE \_\_\_\_\_  
COPY \_\_\_\_\_  
NON-CONF \_\_\_\_\_  
DEPUTY UR

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