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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2014 008181

2014 FEB 11 PM 3: 36

MICHAEL B. BROWN
RECORDER

Recording requested by: Extreme Exteriors LLC

Space above reserved for use by Recorder's Office

When recorded, mail to:

Document prepared by:

Name: Extreme Exteriors LLC

Name Robert Robinson

Address: 9413 Cleveland St.

Address 9413 Cleveland St.

City/State/Zip: Crown Point, IN 46307

City/State/Zip Crown Point, IN 46307



Claim of Lien

State of INDIANA

County of LAKE

I, Robert Robinson being duly sworn, state the following:

In accordance with an agreement to provide labor and/or material, I did furnish the following labor and/or materials:

Swing material and labor.

on the following described real property located in LAKE County, State of

INDIANA, commonly known as:

lot 9 in Woods of cedar Creek, an addition to the town of Cedar Lake, as per plat hereof, recorded in Plat Book 100 Page 35, in the office of the Recorder of Lake County, INDIANA.

and legally described as: 14233 Rocklin St. Cedar Lake, IN 46303

← 14235 Rocklin St. Cedar Lake, IN 46303

45-15-35-204.001-000-043

45-15-35-204-002.000-043

which property is owned by MO Construction Enterprises whose address is

5168 E 81st Ave Merrillville IN, 46410

, of a total value of \$ \$3,712.50, of which there remains unpaid \$ 3,712.50, and I further state that I

furnished the first of the items on the date of Nov-28-2013, and the last of the items on

★NOVA LF136 Claim of Lien Pg.1 (07-11)

\$13
CHK# 2044
CA

2009Y

the date of Feb-5-2014

I hereby, under the laws of the State of INDIANA, claim a lien against the above-described property in the amount of money, stated above, which remains unpaid to me.

[Signature]
Signature of Person Claiming Lien

ROBERT ROBINSON
Name of Person Claiming Lien

Address of person claiming lien:

NOTARY CERTIFICATION FOR CLAIM OF LIEN

State of Indiana

County of Lake

On 2/11/14 (date), Robert Robinson (name of claimant), came before me personally, and duly sworn on oath, and under penalty of perjury, stated that he or she is the claimant described in the above claim of lien and that he or she has read the foregoing claim of lien and has knowledge of and personally knows the foregoing statement of claim of lien which he or she subscribed is true and correct and is not frivolous, nor clearly excessive, and is made with reasonable cause. Subscribed and sworn to before me on the above noted date by the above noted claimant, and proved to me on the basis of satisfactory evidence to be the person who appeared before me.

[Signature]
Notary Signature

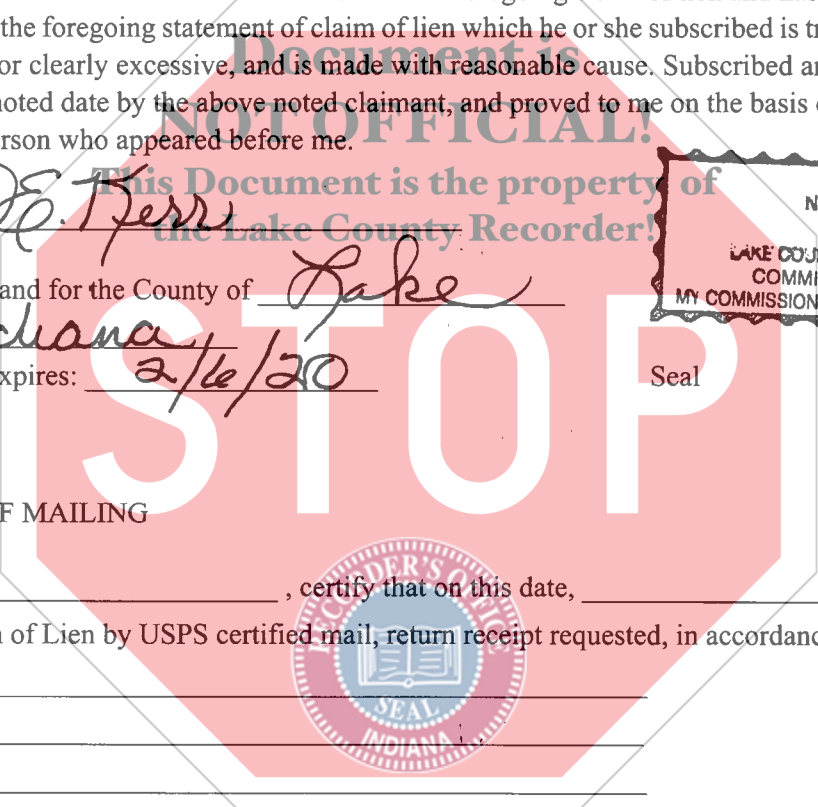
Notary Public, In and for the County of Lake

State of Indiana

My commission expires: 2/16/20



Seal



CERTIFICATE OF MAILING

I, _____, certify that on this date, _____, I have mailed a copy of this Claim of Lien by USPS certified mail, return receipt requested, in accordance with the law, to:

Name: _____

Address: _____

Date: _____

Signature of Person Mailing Claim of Lien

Name of Person Mailing Claim of Lien