STATE OF INDIAG FILED FOR RECORD

2014 047210

2014 AUG -6 PM 1: 02

MICHAEL B. SROWN RECORDER

Commitment Number: 3255669

After Recording Return To: ServiceLink, LLC 1400 Cherrington Parkway Moon Township, PA 15108

## PROPERTY APPRAISAL (TAX/APN) PARCEL IDENTIFICATION NUMBER

State: 45-08-04-182-008.000-004/ Local: 25-44-0095-0034

## QUITCLAIM DEED S

BANK OF AMERICA, N.A., whose mailing address is 2505 W CHANDLER BLVD (MAIL CODE: AZ1-805-03-03) CHANDLER, AZ 85224, hereinafter grantor, for \$10.00 (Ten Dollars and Zero Cents) in consideration paid, conveys and quitclaims to INNOMAX HOME SOLUTIONS, LLC., hereinafter grantee, whose tax mailing address is 2647 GATEWAY RD., SUITE 105-137, CARLSBAD, CA 92009, with quitelaim covenants, all right, title, interest and claim to the following land in the following real property:

All that certain parcel of land situated in the City of Gary, County of Lake, State of Indiana, being known and designated as follows: Lot Numbered 36 and the South 1/2 of Lot 35, Block 95, as shown on the recorded plat of Gary Land Company's First Subdivision, in the City of Gary, recorded in Plat Book 6, page 15, in the Office of the Recorder of Lake County, Indiana.

Property Address is: 441 FILLMORE ST, GARY, IN 46402

Prior instrument reference: 2014-017359

DULY ENTERED FOR TAXATION SUBJECT FINAL ACCEPTANCE FOR TRANSFER

AUG 0 6 2014

PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR

03296 E

Executed by the undersigned on July 22nd, 2014:
BANK OF AMERICA, N.A.
By:
Name: Fernando Mayorga
Its:
STATE OF COUNTY OF The foregoing instrument was acknowledged before me on, 2014 by on behalf of BANK OI
AMERICA, N.A. who is personally known to me or has produced as identification, and furthermore, the aforementioned person has acknowledged that his/he signature was his/her free and voluntary act for the purposes set forth in this instrument.
**See Attached Ack** NOT OFFICIAL
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.  Print Name
This instrument prepared by: Jay A. Rosenberg, Esq., and Jacqueline Meyer Goldman, Esq., (Indiana Bar Number: 22724-53), Rosenberg LPA, Attorneys At Law, 3805 Edwards Road, Suite 550, Cincinnati, Ohio 45209 (513) 247-9605 Fax: (866) 611-0170.

## CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California				
County of Ventura				
OnJuly 22,2014	before me,	Ani Hakobyan	(Notary Public	
		(Here insert name and title of the officer)		
personally appeared	Fernando Mayorga			
who 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(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.				
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.				
WITNESS my hand and official seal. Current is  ANI HAKOBYAN COMM. #2034753 Notary Public · California Los Angeles County My Comm. Expires July 26, 2017  This Document is the property of				
ADDITIONAL OPTIONAL INFORMATION				
DESCRIPTION OF THE A	TTACHED DOCUMENT	INSTRUCTIONS FOR COMP  Any acknowledgment completed in Californic appears above in the notary section or a sep- properly completed and attached to that do document is to be recorded outside of Californ	n must contain verbiage exactly as arate acknowledgment form must be cument. The only exception is if a ia. In such instances, any alternative	
(Title or description of		acknowledgment verbiage as may be printed verbiage does not require the notary to do son California (i.e. certifying the authorized capa document carefully for proper notarial wording	nething that is illegal for a notary in city of the signer). Please check the	
Number of Pages 2	ocument Date 7/22/2014	State and County information must be the S signer(s) personally appeared before the nota     Date of notarization must be the date that the must also be the same date the acknowledgm.	ry public for acknowledgment. signer(s) personally appeared which	
(Additional in	nformation)	The notary public must print his or her not commission followed by a comma and then y  Print the name(s) of document signer(s) w	our title (notary public).	
CAPACITY CLAIMED BY ☐ Individual (s) ☑ Corporate Officer AVP	THE SIGNER	notarization.  Indicate the correct singular or plural forms he/she/they, is /are ) or circling the correct for information may lead to rejection of documer  The notary seal impression must be clear impression must not cover text or lines. If seal impression must not cover text or lines.	by crossing off incorrect forms (i.e. orms. Failure to correctly indicate this at recording.  and photographically reproducible. seal impression smudges, re-seal if a	
(Title)  Partner(s)  Attorney-in-Fact  Trustee(s)  Other		acknowledgment is not misused or at Indicate title or type of attached docu Indicate the capacity claimed by the	ne signature on file with the office of sired but could help to ensure this tached to a different document.  The ment, number of pages and date.  The signer. If the claimed capacity is a	
		corporate officer, indicate the title (i.  Securely attach this document to the signed d		