

Recording Requested By:
Bayview Loan Servicing LLC
Prepared By:
Cara Hardy
4500 Cherry Creek Dr, Suite 650
Denver, Co 80246
When recorded mail to:
Bayview Loan Servicing LLC
4425 Ponce De Leon Blvd., 5th Floor,
Coral Gables, FL 33146

and

2014 078734

STATE OF FLORIDA
LAKE COUNTY
FILED FOR RECORD
2014 DEC 11 AM 8:49
MICHAEL B. BROWN
RECORDER

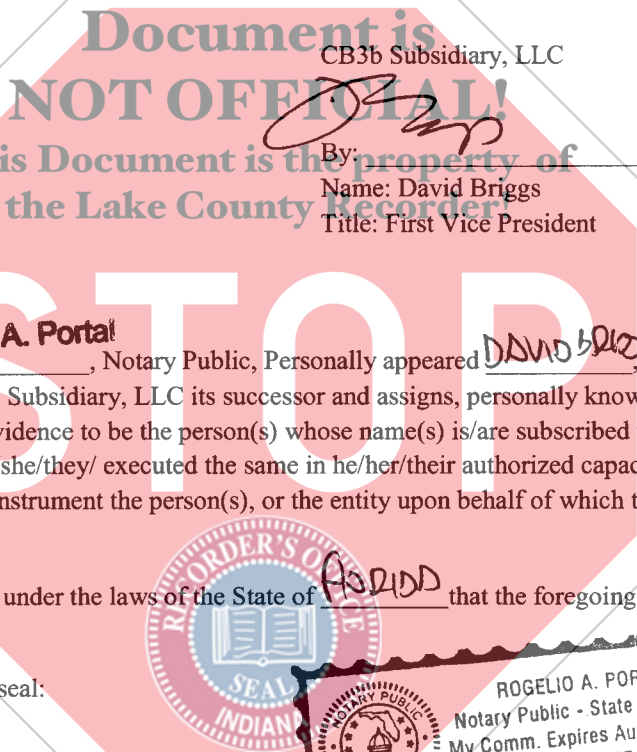
ASSIGNMENT OF MORTGAGE

FOR VALUE RECEIVED, the undersigned, **CB3b Subsidiary, LLC** whose address is **4425 Ponce De Leon Blvd., 5th Floor, Coral Gables, FL 33146** hereby assign and transfer to **Metropolitan Life Insurance Company**, whose address is **10 Park Avenue, Morristown, NJ 07962**, all its right, title and all beneficial interest in and to a certain Mortgage and Note, executed by Sigvald D Berg, A Single Man to CitiFinancial Mortgage Company, Inc. and bearing the date of June 28, 2006 and recorded on July 12, 2006, with the original loan amount of \$133,979.14 in the office of the Recorder of Lake County, State of IN in Book N/A at page N/A or Instrument #2006060060.

Property Address: 216 N LIBERTY ST, HOBART IN 46342

IN WITNESS WHEREOF, the undersigned has caused this Assignment of Mortgage to be executed on

5/29/2014



CB3b Subsidiary, LLC

By: *[Signature]*
Name: David Briggs
Title: First Vice President

Florida
Miami-Dade

State of
County of

On *5/29/2014* before me, **Rogelio A. Portal**, Notary Public, Personally appeared *DAVID BRIGGS*, who is the *F.V.P.*

of CB3b Subsidiary, LLC its successor and assigns, 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 he/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.

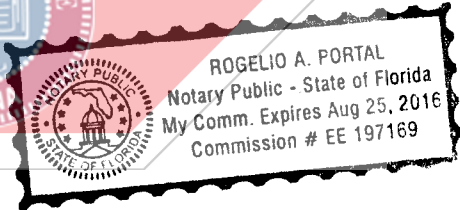
I certify under penalty of perjury under the laws of the State of *FLORIDA* that the foregoing paragraph is true and correct.

WITNESS my hand and official seal:

[Signature]

Notary Public in and for said County and State
My Commission Expires: _____

(SEAL)



I affirm, under penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. - Cara Hardy

12-75989

RM