STATE OF INC.

LAKE COUNT:
FILED FOR RECORD

2014 082013

2014 DEC 24 AM 9: 28

MICHAEL B. SROWN RECORDER

## SATISFACTION OF MORTGAGE

	s, that a certain Mortgage exec		Michael C Malaski ai	
husband and wife			ion Systems, Inc. as n	ominee for the
beneficial owner, whose address is				
beneficial owner has received full	. •			
hereby cancel and discharge said n		9th		July, 2010
in the amount of \$	281,000.00 and recorded as I		2010 041824	
in the Recorder's Office of	Lake	County, State of	Indi	ana
	11.16			
IN WITNESS WHEREOF, the	2 2	•		
duly authorized, has fully execut	ed the foregoing instrument	on the	16th day of	
December 2014	Door	montic		*
	Doca	Mortgage Electron	c Registration Systems,	lnc.
26 F 1 1 3 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NOTO	by nominee for Ho	rizon Bank, N.A.	Care I
*28 **	NUIUI	A A HALA	The Park	
and the state of t	Plate Decision	By Sulley C	MARIO	
CHAMIN ON THE LAND	inis Document	Assistant Secretary	byrty of	
STATE OF INDIANA	the Lake Co	Shelley Rainford	derl	
COUNTY OF LAPORTE	All the State of Austra	P.O. Box 800 Mic	chigan City, IN 46361	
On the A5th	de D	20141-0	01	11 D - i C 1
On the 15th	day of December	2014 before me app		elley Rainford
personally known to me to be				
who resides at P.O. Box 2026,				
the foregoing instrument; that he				
instrument is such corporation sea		er of the board of direc	ctors of said	
corporation, and that he signed his	name thereto by like order.		111	MILL
WITTIESS MY HAND 4 OF	EIGIAL SEAL.	111	the of	
WITNESS MY HAND and OF	FICIAL SEAL:	1100		
Mr. Commission Francisco	annum.	KELLIE RUS	BOLDT	
My Commission Expires:		Notary Public, Sta	te of Indiana	/
County of Residence:		LaPorte C	ounty 585290	
"I affirm under the population for a	SEAL SEAL	MAN Comminging	n Evnirge	de
"I affirm, under the penalties for p in this document, unless required l	erjury, mat i nave taken reason	itable care to the dad Fac	20 speral security number	I
This instrument prepared by and r		There's realitioner, is	oan operations	
		Arran L	Challer Daintand T	Onometican
Horizon Bank, N. A., P.O. Box 80	o, iviicnigan City, iiv 46361	ALLI WILLIAM	Shelley Rainford, Loan	Operations
MIN #:	100272625112270402	MEDC Tolons	NT1 (000) (70	(277
MIIN #:	100272635112279403	iviEks relephon	e Number: 1 (888) 679	-03// 1 <b>7</b>
		Samuel Area Cher		ı. I <u>Z</u>
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				(Kr 27281
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