STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2015 022302

2015 APR 16 AM 9: 05

MICHAEL B. BROWN RECORDER

SATISFACTION OF MORTGAGE

| THIS CERTIFIES, that a certain Mortgage executed by Omprakas | sh &-Manja-Mandhai | 1a |
|--|----------------------|--------------------------|
| husband and wife to Mortgage Electronic Registration Systems | | r the |
| beneficial owner, whose address is P.O. Box 2026, Flint MI 48501-2026, does hereby acknowledge. | | |
| beneficial owner has received full payment and satisafaction of the same and in consideration | n, thereof, does | • |
| hereby cancel and discharge said mortgage dated the 30th day of | August, 2011 | · |
| in the amount of \$250,000.00 and recorded as Document Number | 2011 051251 | • |
| in the Recorder's Office of This Docu Lake County, in the state of County, in the state of County | f Indiana | |
| 4h a I alsa Cassats Dagas stad | | • |
| IN WITNESS WHEREOF, the said Mortgage Electronic Registration Systems, Inc., 1 | by the officer | |
| duly authorized, has fully executed the foregoing instrument on the1st | day of | |
| <u>April</u> 2015 | | |
| Mortgage Electronic Registrat | | |
| by nominee for Horizon Bank | c, N.A. | |
| Shallo for the | | |
| By Willer Micabile | d (1) + 1 | |
| Assistant Secretary by | | |
| STATE OF INDIANA Shelley Rainford | | , |
| COUNTY OF LAPORTE P.O. Box 800 Michigan City | 7, IN 46361 | |
| | | |
| On the 1st day of April 2015 before me appeared. | Shelley Rainford | <u> </u> |
| personally known to me to be the Assistant Secretary of Mortgage Electronic Registration Systems, Inc. | | |
| who resides at P. O. Box 2026, Flint, MI 48501-2026, the corporation described in and v | | |
| the foregoing instrument; that he knows the seal fo said corporation; that the seal affixed to | | |
| instrument is such corporation seal; that it was so affixed by order of the board of directors | OI SAID | CECILE LYNN SALRIN |
| corporation, and that he signed his name thereto by like order. | HOTARY | La Porte County |
| WITNESS MY HAND and OFFICIAL SEAL: | SEAL | My Commission Expires |
| WITNESS WIT HAIVED and OFFICIAL SEAL: | 2011 | <u>Dec</u> ember 9, 2021 |
| My Commission Expires: 12 .9 · 2021 | • | |
| County of Residence: | | |
| | | * |
| "I affirm, under the penalties for perjury, that I have taken reasonable care to redact each so | cial security number | |
| in this document, unless required by law" Shelley Rainford, Loan Operations | | |
| This instrument prepared by and return to: | | |
| Horizon Bank, N. A., P.O. Box 800, Michigan City, IN 46361 Attn: Shelley Rainford, Loan Operations | | |
| · · · · · · · · · · · · · · · · · · · | | |
| MIN #: 100272635113127460 MERS Telephone Number: 1 (888) 679-6377 | | |
| | | |

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