

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 027401

2015 MAY -7 AM 9:01

MICHAEL B. BROWN
RECORDER

Tax Key No. 45-03-29-354-006.000-024

3
Mail tax bills to:
Cristhian A. Vasquez Aguilar
1115 Beacon Street
East Chicago, IN 46312

WARRANTY DEED

THIS INDENTURE WITNESSETH, that Juan Serna and Alicia Martinez, of Lake County, Indiana ("Grantor"),
CONVEY AND WARRANT to Christian A. Vasquez Aguilar, of 1115 Beacon Street, East Chicago, Lake County, Indiana, in
consideration of Ten Dollars (\$10.00) and other good and valuable consideration, the receipt and sufficiency of which are hereby
acknowledged, the following described real estate in Lake County, in the State of Indiana:

Lot 8, in Block 5, in Resubdivision of Blocks 13, 14, 15, Lots 12 to 30, in Block 16 and Blocks 17, 26, 27 and 28, in the
Southwest Quarter of Section 29, Township 37 North, Range 9 West of the 2nd Principal Meridian, in the City of East
Chicago, as per plat thereof, recorded in Plat Book 5, page 27, in the Office of the Recorder of Lake County, Indiana.

Commonly known as: 1115 Beacon Street, East Chicago, IN 46312

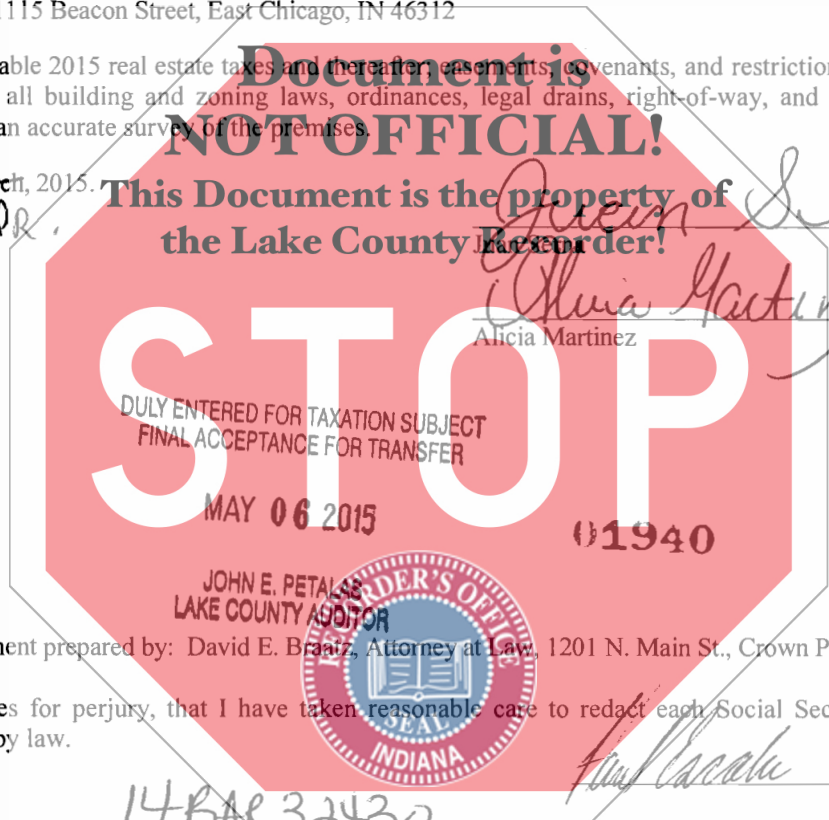
Subject to the 2014 payable 2015 real estate taxes and thereafter assessments, covenants, and restrictions contained in prior
instruments of record; all building and zoning laws, ordinances, legal drains, right-of-way, and other matters which
would be disclosed by an accurate survey of the premises.

Dated this 19 day of ~~March~~, 2015.

APR

**This Document is the property of
the Lake County Recorder!**

Juan Serna
Alicia Martinez
Alicia Martinez



This instrument prepared by: David E. Brautz, Attorney at Law, 1201 N. Main St., Crown Point, IN 46307

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

David Brautz

14BAR32430

PLEASE RETURN TO:
BARRISTER TITLE
15000 SO. CICERO AVE.
OAK FOREST, IL 60452



20.
ck. 21664
DN

Acknowledgment by Individual

State of ALABAMA County of WALKER

On this 1ST day of APRIL, 20 15 before me, JERRY R BANKS
Name of Notary Public

the undersigned Notary Public, personally appeared JUAN SENA

Name of Signer(s)

- Proved to me on the oath of _____
- Personally known to me
- Proved to me on the basis of satisfactory evidence AL DRIVER LICENSE, CVS PRESCRIPTION CARD
(Description of ID)

to be the person(s) whose name(s) is/are subscribed to the within instrument, and acknowledged that he/she/they executed it.

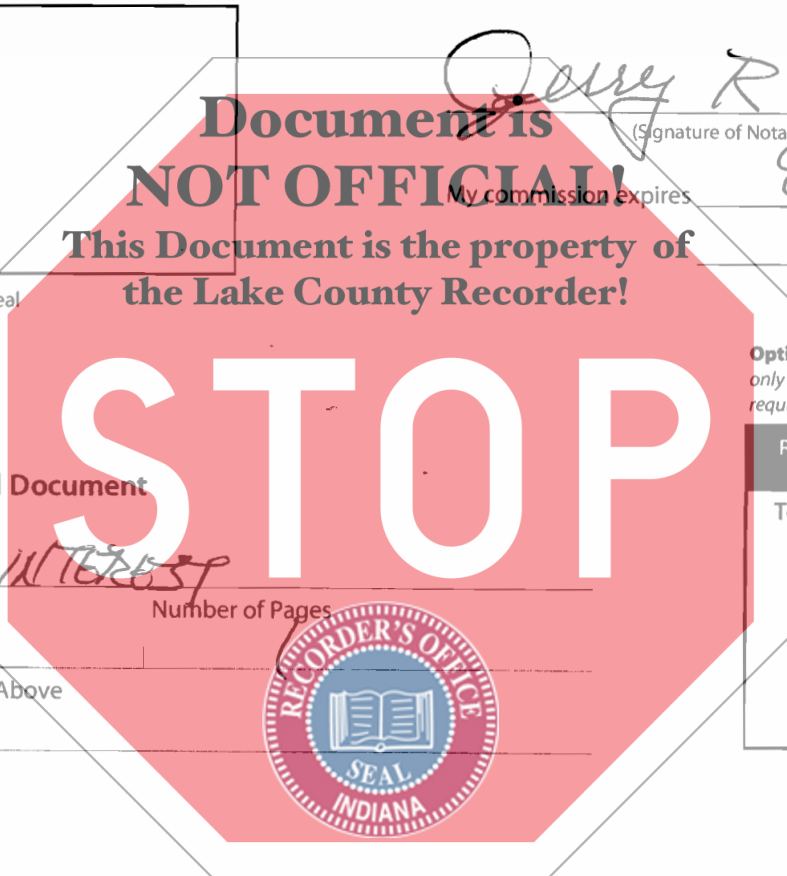
WITNESS my hand and official seal.



Notary Seal

Jerry R Banks
(Signature of Notary Public)
My commission expires 8/21/17

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Optional: A thumbprint is only needed if state statutes require a thumbprint.

Right Thumbprint of Signer

Top of thumb here

Description of Attached Document

Type or Title of Document

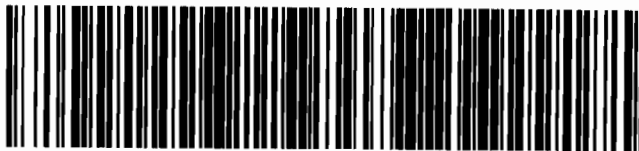
Partnership Agreement

Document Date

4/1/15

Number of Pages

Signer(s) Other Than Named Above



COPY CERTIFICATION BY NOTARY



State of Arizona }
County of Pima } ss.

On this the 30 day of March, 2015, I certify that the attached or preceding document of 4 pages is a true, exact, complete and unaltered copy of

Description of Original Document

presented to me by

Alicia Martinez

Original Document's Custodian on Above Date

and that, to the best of my knowledge, the original document is neither a public record nor a publicly recordable instrument, certified copies of which are available from an official source other than a Notary Public.

- OR -

an official notarial record in my possession.



_____, Notary Public

Signature of Notary Public

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Place Notary Seal/Stamp Above

Notary's Name Printed/Typed

Appointment Expiration Date

Jul 3, 2018

OPTIONAL

This section is required for notarizations performed in Arizona but is optional in other states. Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Further Description of Attached Document

Address Where Original is Kept: _____

Original Document Date: _____ Copy Kept by Notary? Yes No

Signer(s) or Issuing Agency: _____

Capacity Claimed by Custodian

- Individual
- Corporate Officer — Title: _____
- University or School Officer — Title: _____
- Governmental Officer or Agent — Title: _____
- Business Proprietor or Manager
- Attorney
- Trustee
- Other: _____

Custodian Is Representing: _____

