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LANE DATE OF FILED FOR RECORD

2016 AUG 24 AH 9: 01

MICHAEL B. BROWN RECORDER

COVER PAGE

Document Type: Assignment of Mortgage/Deed of Trust

Recording Requested By and When Recorded Return To: MCM CAPITAL PARTNERS, LLC 7500 OLD GEORGETOWN RD. BETHESDA, MD 20814

BETHESDA, MD 20814

Loan #:1040000796 ~ OO DOCUMENT IS

ASSIGNOR(S) NAME:

ASSIGNEE(S) NAME/ADDRESS:

This Document is the property of the Lake County Recorder!

Property Address:
8421 MANOR AVENUE
MUNSTER, IN 46321-0000

MCMAS PRIMESTAR AWL9712053 CPA_CVRPG.ptk

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Record & Return To:	This instrument was prepared by: Corporation Service Company
	801 Adlai Stevenson Drive Springfield, IL 62703
1 104000000	800-858-5294 Prepared by: Rebecca O'Neill
Loan #: 1040000796 Deal Name: PAF-Due Diligence	
IN, Lake S397646ASG REF 1/7106692	ocument is
Society, FSB, not in its individual capacity but solely 33556, herein ("Assignor"), does hereby grant, sell, assign	GNMENT OF MORTGAGE Iment is the property of of which is hereby acknowledged, the undersigned, Wilmington Savings Fund as trusted of the Princestal Horund I Trust, PO Box 447, Odessa, FL, on, transfer and convey, without recourse unto Wilmington Savings Fund Society ustee for Ventures Trust 2013-I-H-R, 7500 Old Georgetown Rd., Suite 1300 RTGAGE
recorded in Lake County, IN and referenced below;	
Borrower: GUS G. ROMAS Instrument: 2007100263	
and all rights accrued or to accrue under said document TO HAVE AND TO HOLD the same unto Assignee, its the document above-described.	referenced abuve successors and assigns, forever, subject only to the terms and conditions of a reasonable care to redact each Social Security number in this
IN WITNESS WHEREOF Assignor has caused this As	signment to be executed and delivered, effective 7/1/2016.
IN WITHLESS WILLIAM, Assignor has caused the As	Wilmington Savings Fund Society, FSB, not in its individual capacity but solely as trustee of the Primestar-H Fund I Trust
	By: Name: Jamie Rand Vice President
STATE OF FLOVIDA COUNTY OF HILSBOYOUAL	
who proved to me on the basis of satisfactory evidence t and acknowledged to me that he/she/they executed the s	no be the person(s) whose name(s) is/are subscribed to the within instrument ame in his/her/their authorized capacity(ies), and that by his/her/their upon behalf of which the person(s) acted, executed the instrument.
WITNESS my hand and official seal. Notary Public Carron N. Carrier Notary Public Carron N. Carrier	CARIN N. CANTER MY COMMISSION # FF967722 EXPIRES March 03, 2020 I torriaNolaryService com
My Commission Expires: 3-3-20	