Mail tax bills to: CORNERSTONE 4 PIA ESDAT 98149 1618 Homan Dr.

Schererville, IN 46375

STATE OF INDIANA FILED FOR RECORD 2017 HAR 27 PM 2: 39

MICHAEL B. BROWN RECORDER

OUIT CLAIM DEED

THIS INDENTURE WITNESSETH, that CORNERSTONE HOME ESTATES, LLC a Limited Liability Company organized and existing under the laws of the State of Indiana ("Grantor") QUITCLAIM(s) all of its right and interest in the real estate described below to CORNERSTONE ALPHA ESTATES LLC a Limited Liability Company organized and existing under the laws of the State of Indiana ("Grantee") in consideration of TEN DOLLARS and other 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 NUMBERED 21 IN BLOCK 4 IN HOMESTEAD GARDENS MASTER ADDITION, IN THE TOWN OF HIGHLAND, AS PER PLAT THEREOF RECORDED IN PLAT BOOK 31, PAGE 79 IN THE OFFICE OF THE RECORDER OF LAKE COULTY INDIANA

Key No.: 45-07-21-2270029 000-026s the property of Commonly known as: 3019 Fullith Avanue, Highland, Indiana 46322

The undersigned person(s) executing this dee I on behalf of the Limited Liability Company represents and certify that they are a current member/manager of said Limited Liability Company and have been fully empowered by a proper meeting and vote of the Limited Liability Company members to execute and deliver this deed.

IN WITNESS WATEREOF, the Grantor has executed this deed this 2 day of March, 2017

CORNERSTONE HOME ESTATES, KE

By: Marcus Arnold, Manager

STATE OF INDIANA

COUNTY OF LAKE

DULY ENTERED FOR TAXATION SUBJECT FINAL ACCEPTANCE FOR TRANSFER

MAR 27 2017

JOHN E. PETALAS LAKE COUNTY AUDITOR

Before me, a Notary Public in and for said County and State personally appeared Marcus Arnold manager of CORNERSTONE HOME ESTATES, LLC, who acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal

Sworn to and subscribed before me this 21 5th day of March 2017.

My Commission Expires: 06/09/24

Resident of Lake County, Indiana

Robert H. Sorge, MOTARY PUBLIC

I AFFIRM, UNDER THE PENALTIES FOR PERJURY, THAT I HAVE TAKEN REASON-ABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY

PREPARED BY

ROBERT H. SORGE Seal Notary Public - State of Indiana Lake County My Commission Expires Jun 9, 2024

NO SALES DISCLOSURE NEEDED

This Document Prepared By: Robert H. Sorge, 6243 Hohman Avenue, Hammond. IN 46324 Att..

No. 17775-45

Approved Assessor's Office No. 17775-45

By: