

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2017 019882

2017 MAR 29 AM 9:00

MICHAEL B. BROWN
RECORDER

SPECIAL WARRANTY DEED

Property Address:
6757 Jefferson Street
Merrillville, IN 46410

Tax Parcel No.: 45-12-09-477-008.000-030

This Indenture Witnesseth, That U.S. Bank Trust, N.A., as Trustee for LSF9 Master Participation Trust, organized and existing under the laws of the United States of America,

Convey(s) and Specially Warrant(s) to Community Initiative, LLC, a Georgia limited liability company

for the sum of Ten & 00/100 Dollars (\$10.00) and other valuable consideration, the receipt of which is hereby acknowledged, the following described real estate in Lake County, in the State of Indiana:

Part of the East Half of the Southeast Quarter of Section 9, Township 35 North, Range 8 West of the Second Principal Meridian, more particularly described as follows: Beginning at a point 915 feet West of, and 620 feet North of the Southeast corner of said Section 9; thence North 90 feet along a line parallel to the East line of Section 9; thence East 135 feet; thence South 90 feet along a line parallel to the East line of said Section 9; thence West 135 feet to the point of beginning, in Lake County, Indiana.

***Subject To** (i) all easements, highways, rights-of-way, covenants, conditions, restrictions and other limitations of record, if any; (ii) all real estate taxes and assessments due for the year 2016 and payable in 2017 and thereafter, (iii) all matters which would be disclosed by an accurate survey and physical inspection of the Real Estate; and (iv) the interests of any tenant(s) in possession of the Real Estate.*

Grantor, as its sole warranty herein, specially warrants to Grantee, and to Grantee's successors and assigns, that Grantor will forever defend title to the Real Estate (subject to the matters to which the conveyance is hereinabove made subject) against those claims and only those claims, of all persons who shall claim title to or assert claims affecting the title to the Real Estate, or any part thereof, by, through, under, or based upon the acts of, Grantor, but none other.

METROPOLITAN TITLE OF IN
9604 COLDWATER ROAD
SUITE 105
FORT WAYNE IN 46825
#97584

001678

File No.: 4035-97584

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DULY ENTERED FOR TAXATION SUBJECT
FINAL ACCEPTANCE FOR TRANSFER

MAR 24 2017

JOHN E. PETALAS
LAKE COUNTY AUDITOR

AMOUNT \$ 20-
CASH _____ CHARGE _____
CHECK # 4035125737
OVERAGE _____
COPY _____
NON - COM _____
CLERK AM

The undersigned person executing this Deed on behalf of Grantor represents and certifies that he/she has been fully empowered to execute and deliver this Deed pursuant to the Power of Attorney referenced below and said Power of Attorney remains in full force and effect and has not been terminated or rescinded by either party; that Grantor has full capacity to convey the real estate described herein, and that all necessary action for the making of such conveyance has been taken and done.

IN WITNESS WHEREOF, Grantor has caused this deed to be executed this 15 day of March, 2017.

U.S. Bank Trust, N.A., as Trustee for LSF9 Master Participation Trust by Caliber Real Estate Services, LLC as its Attorney-in-Fact under Power of Attorney recorded 08/15/2016 as Instrument No. 2016055193

By: [Signature]
Heather Sayabouasy

Its: Authorized Signatory

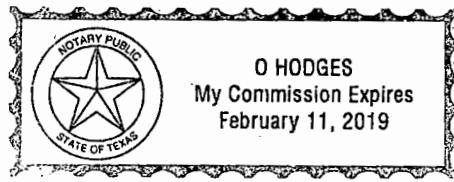
State of Texas; Dallas County:

Before me, a Notary Public in and for the said County and State, personally appeared Heather Sayabouasy the Authorized Signatory of Caliber Real Estate Services, LLC as Attorney-in-Fact for **U.S. Bank Trust, N.A., as Trustee for LSF9 Master Participation Trust**, who acknowledged the execution of the foregoing Special Warranty Deed, and who, having been duly sworn, stated that the representations therein contained are true and correct, to the best of his/her knowledge, information and belief.

Witness my hand and notarial seal this 15 day of March, 2017.

My commission expires: 02/11/2019

Signature [Signature]
Printed O HODGES, Notary Public
Residing in Dallas County, TEXAS



This instrument prepared by Jeffrey S. Harlan, Attorney at Law.

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

Greg Pitt
Name:

Grantee's Mailing Address and Mailing Address for Tax Bills:
(must be a street address)

PO Box 159
ALPHARETTA GA 30009

**Document is
NOT OFFICIAL!**

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

