This Document Was Prepared by:
CHRISTOPHER GNATZ
9848 Tabor Street #216
Los Angeles, CA 90034

After Recording Please Return to:
CHRISTOPHER and JASMINA GNATZ
9848 Tabor Street #216
Los Angeles, CA 90034

This Space Reserved for Recording Purposes

2019-086295

2019 Dec 13

9:26 AM

STATE OF INDIANA LAKE COUNTY FILED FOR RECORD MICHAEL B BROWN RECORDER

	QUITCLAIM DEED
Λ	QUITCLAIM DEED, made this 19th day of September , 20 19
γ	CHRISTOPHER GNATZ a/k/a Chris Gnatz of
	LOS ANGELES
	County ("grantor"), for and in consideration of the sum of
	Zero
	DOLLARS (\$ 0.00 , the receipt and sufficiency of which is hereby acknowledged and received,
	and for other good and valuable consideration received, does hereby remise, release and quitclaim unto
	CHRISTOPHER GNATZ AND JASMINA GNATZ * ("grantee"), whose mailing *husband and wife
	address is 9848 Tabor Street, #216, Los Angeles, GA 90034 his/her
	INDIANA heirs and assigns, the following described premises, County of LAKE INDIANA Lake County Recorder! State of the Lake County Recorder!
	Also known as street and number 5722 ASH AVENUE, GARY, IN 46403 Tax Parcel ID# 45-05-31-453-008.000-004
	TAN PAILET IDM 10 00 01 400 000.000 004
	Grantor Christopher Gnatz a/k/a Chris Gnatz
	Witness (if required) STATE OF Witness (if required) Witness (if required) 31722
	The foregoing instrument was acknowledged before me, public in and for the state of by DULY ENTERED FOR TAXATION SUBJECT
	on the day of DEC 1 3 2019
	Witness my hand and official seal JOHN E. PETALAS LAKE COUNTY AUDITOR
	NOTARY PUBLIC My commission expires 11 43 143 695
<u> </u>	INOTARY SEALL ALO OAL FO DICCLOSCIOL NIELE NELL .)
	itle recorded this document ion. Fidelity did not examine
	the title of the that estate Approved Assessor's Office

By:_

affected. MG2019-2080

CALIFORNIA ACKNOWLEDGMENT

CIVIL CODE § 1189

before me, AUSANINO ABUINO - NOTARY PUBLIC Here Insert Name and Title of the Officer Date Here Insert Name and Title of the Officer Description of Attached Document Title or Type of Document Title or Type of Document Document Date: Capacity(ies) Claimed by Signer(s) Signer's Name: Capacity(ies) Claimed by Signer(s)		\(\text{\text{3}}\)		
before me, ALEANDRO S. ACUINO III Notary Fulfic. California bear of the person of the instrument of the instrument of the person of the instrument of the instru				
before me, AUSANINO ABUINO - (NOTARC) FUBLIC Date Here Insert Name and Title of the Officer personally appeared CHIUSTOPACE Without Grant To the Officer personally appeared CHIUSTOPACE Without Grant To the Officer who proved to me on the basis of saltsfactory evidence to be the person(s) whose name(s) is are subscrite to the within instrument aft has a Designature of the State of Species of the Same in his her/their authorized capacity(les), and that by his her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the histrinent. Certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. Completing this information can acter direction of the document or fraudulent reattachment of this form acter direction of the document. Description of Attached Document Title or Type of Document: Document Date: Document Date: Signer's Name: Corporate Officer - Title(s): Partner - Limited General Partner - Limited General Individual Attorney in Fact Individual Attorney in Fact Trustee Guardian or Conservator Other: Other: Other: Other: Other: Other: Other: Other: Other: Description of Attached Document Document or fraudulent reattachment of this form acter direction of the document or fraudulent reattachment of this form acter direction of the document or fraudulent reattachment of this form acter direction of the document. Signature of Klosary Public Option: Optio	State of California			
before me, Description of Attached Document Title or Type of Document Document Date: Description of Attached Document Title or Type of Document Title or Type of Document Document Date: Description of Attached Document Title or Type of Document Document Date: Document Date: Document Date: Document Date: Description of Attached Document Title or Type of Document: Document Date: Doc	County of US ANGELES			
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is a subscrition the within instrument of Pages of States (1 to one this lefter (1) to one states (1) to one within instrument of Pages (2) evidence to be the person(s) whose name(s) is a subscrition to the within instrument of Pages (3) evidence to be the person(s) whose name(s) is a subscrition to the within instrument of Pages (3) evidence to be the person(s) whose name(s) is a subscrition to the within instrument of the Same in Historic	NO -1 - 1 - 1			
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) learners subscribed to the within instrument of plass of satisfactory evidence to be the person(s) whose name(s) learners subscribed to the within instrument of plass of satisfactory evidence to be the person(s) whose name(s) learners subscribed to the within instrument of plass of the state of california that the person(s), or the entity under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. Completing this information can deter diteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document				
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) lefare subscrite to the within instrument all pass of leads of leads of an this lefter (by executed the fame in his/her/their authorized capacity(es), and that by his-her/their signature(s) on the instrument the person(s), or the entity under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. Completing this information can deter ditestation of the document or fraudulent reattachment of this form to chulent the instrument. Description of Attached Document Title or Type of Document Document Date: Documen				
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) lefare subscrited the within instrument of the day of deceptive on the state of the same in his/her/their authorized capacity(les), and that by lus-her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. Control of the State of California that the foregoing paragraph is true and correct.				
to the within instrument of placed on the person of the person of the person of the entity under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. Commission 2144662		vame(s) or signer(s)		
to the within instrument of placed on the person of the person of the person of the entity under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. Commission 2144662	usha proved to me on the hadist of the first	CALLAND AND AND AND AND AND AND AND AND AND		
authorized capacity(es), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the histriment. Certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal. Completing this information can deter filteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Document Date: Document Date: Document Date: Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer – Title(s): Corporate Officer – Title(s): Corporate Officer – Limited General Individual Attorney in Fact Individual Attorney in Fact Trustee Guardian or Conservato Other: Trustee Guardian or Conservato Other: Trustee Guardian or Conservato Other: Ot				
Certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official shall. WITNESS my hand a				
Certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct. Notary Public - California Los Angeles County Commission 2/174662 WITNESS my hand and official spall.	upon behalf of which the person(s) acted, executed the	nty Recorder!		
Les Angeles County Commission 217/662 WITNESS my hand and offisial seal. WI				
Les Angeles County Commission 217/662 WITNESS my hand and offisial seal. WI				
ALEJANDRO S. AQUINO III Notary Public California Los Angeles County Commission #217462 My Comm. Expires Dec 21, 2020 Place Notary Seal and/or Stamp Above Completing this information can deter differential seal. Completing this information can deter differential seal. Completing this information can deter differential seal. Pescription of Attached Document Title or Type of Document: Document Date: Document Date: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Individual Attorney in Fact Individual Guardian or Conservator Other: Guardian or Conservator Other:				
Notary Public - California Lot Angeles County Commission # 2174662 My Comm. Expires Dec 21, 2020 Place Notary Seal and/or Stamp Above Completing this information can deter different of the document or fraudulent reattachment of this form to chumintended document. Description of Attached Document Title or Type of Document: Document Date: Document Date: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer - Title(s): Partner - Limited General Individual Attorney in Fact Individual Guardian or Conservator Other: Guardian or Conservator Other:				
Description of Attached Document Title or Type of Document Document Date: Signer's Name: Corporate Officer - Title(s): Partner - Limited General Individual Attorney in Fact Individual Attorney in Fact Guardian or Conservato Other: Other	ACP THIS CO.	paragraph is true and confect.		
Place Notary Seal and/or Stamp Above Completing this information can seter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Document Date: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer - Title(s): Partner - Limited General Individual Attorney in Fact Individual Guardian or Conservator Other: Other:	Los Angeles County	WITNESS my hand and official spal.		
Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Document Date: 999999999999999999999999999999999999				
Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Document Date: 999999999999999999999999999999999999				
Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Document Date: 999999999999999999999999999999999999	TUNTE	Signature		
Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. Description of Attached Document Title or Type of Document: Document Date: 999999999999999999999999999999999999	Place Notary Seal and/or Stamp Above	Signature of Notary Public		
Description of Attached Document Title or Type of Document: Document Date: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer – Title(s): Partner – Limited General Partner – Limited General Individual Attorney in Fact Individual Attorney in Fact Trustee Guardian or Conservato Other: Other:				
Description of Attached Document Title or Type of Document: Document Date: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer – Title(s): Partner – Limited General Partner – Limited General Individual Attorney in Fact Individual Attorney in Fact Trustee Guardian or Conservato Other: Other:	Completing this information can	geter alteration of the document or		
Title or Type of Document: Document Date: Glacety (ies) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer – Title(s): Partner – Limited General Individual Attorney in Fact Guardian or Conservator Other: Other:				
Title or Type of Document: Document Date: Glacety (ies) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer – Title(s): Partner – Limited General Individual Attorney in Fact Guardian or Conservator Other: Other:	Description of Attached Document	ANA		
Document Date:	CHITCH	MIN DEED/		
Signer(s) Other Than Named Above: Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer - Title(s): Partner - Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Other:		Number of Pages: 1		
Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer - Title(s): Corporate Officer - Title(s): Partner - Limited General Partner - Limited General Individual Attorney in Fact Individual Attorney in Fact Trustee Guardian or Conservator Trustee Guardian or Conservator Other: Other:	, , ,			
Signer's Name: Corporate Officer - Title(s): Partner - Limited General Individual Attorney in Fact Guardian or Conservator Other: Signer's Name: Partner - Limited General Individual Attorney in Fact Guardian or Conservator Other:				
□ Corporate Officer - Title(s): □ □ Corporate Officer - Title(s): □ □ Partner - □ Limited □ General □ Individual □ Attorney in Fact □ Individual □ Attorney in Fact □ Trustee □ Guardian or Conservator □ Other: □ Other: □ Other: □ Other		Circumsta Names		
□ Partner - □ Limited □ General □ Partner - □ Limited □ General □ Individual □ Attorney in Fact □ Individual □ Attorney in Fact □ Guardian or Conservator □ Trustee □ Guardian or Conservator □ Other: □ Other: □ Other:				
☐ Individual ☐ Attorney in Fact ☐ Individual ☐ Attorney in Fact ☐ Trustee ☐ Guardian or Conservator ☐ Trustee ☐ Guardian or Conservato				
☐ Trustee ☐ Guardian or Conservator ☐ Trustee ☐ Guardian or Conservato ☐ Other: ☐ O	☐ Individual ☐ Attorney in Fact	☐ Individual ☐ Attorney in Fact		
Other: Other: Signer is Representing: Signer is Representing:	☐ Trustee ☐ Guardian or Conservator	☐ Trustee ☐ Guardian or Conservator		
Signer is Representing: Signer is Representing:	Other:	Other:		
	Signer is Representing:	Signer is Representing:		

©2018 National Notary Association



This Document is the property of the Lake County Recorder!

> **EXHIBIT** "A" **Legal Description**

For APN/Parcel ID(s): 45-05-31-453-008.000-004

LOTS 14, 15 AND 16 IN BLOCK 3 IN JOHNSON KENNEDY ESTATES 5TH SUBDIVISION, IN THE CITY OF GARY, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 16 PAGE 6 IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.