2019-087839

2019 Dec 19

8:41 AM

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

## ASSIGNMENT OF MORTGAGE

MIN:	_*_	MERS Phone: 1-888-679	9-6377
United M IL 6183 address 92806 it James V	Mortgage LLC 34; PO Box 20 is C/O Carring s successors and V. Gorigus, and	its successors and assigns, whose 026, Flint, MI 48501-2026 hereby gton Mortgage Services, LLC, 160 nd assigns, all its right, title and I bearing the date of the 26th day o	Registration Systems, Inc., as nominee for Royal address is 1901 E. Voorhees St. Suite C, Danville, y assign and transfer to BankUnited, N.A. whose 0 South Douglass Road, Suite 200-A, Anaheim, CA interest in and to a certain mortgage executed by f March A.D. 2010 and recorded on 7th day of April State of Indiana in , and Instrument Number 2010-
Signed	on the <i>S</i>	This DocumeRvisud	ctronic Registration Systems, Inc., as nominee for
		the Lake County	Recorder Croft, Assistant Secretary for MERS
State of_			Assistant Secretary
County o		_ } ss: See Attached	
On the_	day o	of A.D.	, before me, a Notary Public,
	lly appeared		, to me known, who being duly sworn, did say that
	Mortgage LLC		c Registration Systems, Inc., as nominee for Royal said instrument was signed on behalf of said
	nt Prepared By:		
Address	of Preparer: 480	5 Montgomery Road, Suite 328, No.	wood, OH 45212/
19-03674			
	under the penalt iment, unless rec		onable care to redact each Social Security Number in
N	awwD		*Redacted Per Assignor's Express Consent
MIN:	_ <b>_</b> _	MERS Phone: 1-888-679	9-6377

25 12027640 2 A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document, to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

## CALIFORNIA ALL – PURPOSE

## CERTIFICATE OF ACKNOWLEDGMENT

County of	Stat	te of Ca	liforn	ia			,		
Tom Coft person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), 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 instrument.  I certify under PENALTY OF PERTURE under the laws of the State of California that the foregoing paragraph is true and correct.  WITNESS my land and official seafure Lake County Richard County Pelic California Connection of Connecti	Coı	inty of	Ora	inge	· _				
person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), 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 instrument.  I certify under PENALTY OF PERTURY under the laws of the State of California that the foregoing paragraph is true and correct.  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  Signature Multiple State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  WITNESS my land and official seat the Lake County Right of the State of California (Scale)  Signature of Tale (Scale)  (Title or description of Authority document)  WITNESS my land and official seat the State of California (Scale)  (Title or description of Authority (Scale)	On	OCT	28	2019	, before me,	Tricia L	Cannon	, Notary Public	, personally appeared,
person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), 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 instrument.  I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.  This Document is the acoperty of the State of California that the foregoing paragraph is true and correct.  WITNESS my land and official seat the Lake County Riccitant of California that the foregoing paragraph is true and correct.  This Document is the acoperty of the County Ferritage THIS FORM  INSTRUCTIONS FOR COMPLETING THIS FORM  INSTRUCTION	<u>. ·                                     </u>				Tom Craft	, who pr	oved to me on	the basis of satisfact	ory evidence to be the
executed the same in his/her/their authorized capacity(ies), 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 instrument.  I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.  WITNESS my land and official seakly Lake County Record Term (RICALCANN)  WITNESS my land and official seakly Lake County Record Term (RICALCANN)  Oatage County Ricalcann (RICALCANN)  Oatage County Record Term (RICALCANN)  Oatage County Ricalcann (RICALCANN)  Oatage County Rica	pers	son(s) v	hose	name(s)	is/are subscribed to	the within i	nstrument and	acknowledged to me	e that he/she/they
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CAPACITY CLAIMED BY THE SIGNER  ☐ Individual (s) ☐ Corporate Officer ☐ (Title) ☐ Partner(s) ☐ Attorney-in-Fact ☐ Trustee(s) ☐ Other ☐ Other ☐ Other ☐ Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/she/shey. is /ere ) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording: ☐ The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, offierwise complete a different acknowledgment form. ☐ Signature of the notary public must match the signature on file with the office of the county clerk. ☐ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document. ☐ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).	_				·	,	• Print the name		
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corporate officer, indicate the title (i.e. CEO, CFO, Secretary).			100				<ul> <li>Indica</li> </ul>	te title or type of attached doo	timent, number of pages and date.
<ul> <li>Securely attach this document to the signed document</li> </ul>							corpor	rate officer, indicate the title (	i.e. CEO, CFO, Secretary).

## EXHIBIT A LEGAL DESCRIPTION

LOT 17, BLOCK 3, CHICAGO-ROAD SUBDIVISION, CITY OF HOBART, AS SHOWN IN PLAT BOOK 18, PAGE 18, LAKE COUNTY, INDIANA.

Tax ID: 45-09-30-305-007.000-018

