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2020-022128

2020 Apr 21

10:39 AM

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

**REVOCATION AND NOTICE OF REVOCATION
OF LIVING WILL DECLARATION,
HEALTH CARE DURABLE POWER OF ATTORNEY,
APPOINTMENT OF HEALTH CARE REPRESENTATIVE,
AND DURABLE POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS that I, IGNACIO RODRIGUEZ, hereby revoke unconditionally and for all purposes that certain Living Will Declaration, Health Care Durable Power of Attorney, and Appointment of Health Care Representative, given by me to my wife, JOYCE T. RODRIGUEZ, as my Health Care Representative and/or Attorney-in-Fact, and to my niece, MARIA G. MIRAMONTES, and/or my stepson (my wife's son), KEITH A. OSEARO, as successor Health Care Representative(s) and/or Attorney(s)-in-Fact, dated and acknowledged on December 7, 2015, but unrecorded to the best of my knowledge.

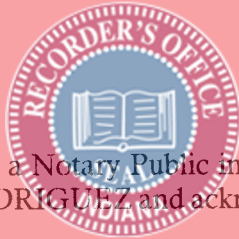
I, IGNACIO RODRIGUEZ, hereby further revoke unconditionally and for all purposes that certain Durable Power of Attorney, given by me to my wife, JOYCE T. RODRIGUEZ, as my Attorney-in-Fact, and to my stepsons (my wife's sons), CHARLES T. OSEARO and/or KEITH A. OSEARO, as successor Attorney(s)-in-Fact, dated and acknowledged on December 7, 2015, but unrecorded to the best of my knowledge.

This instrument shall serve as notice to all interested persons and to the world that the aforesaid documents are now revoked, void, of no further force and effect, and that I will no longer be bound by any thing, act or deed done for me, on my behalf or in my name, place or stead under the authority of said documents.

WITNESS my hand this 8th day of April, 2020.


IGNACIO RODRIGUEZ

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)



Before me, the undersigned, a Notary Public in and for Lake County, State of Indiana, personally appeared IGNACIO RODRIGUEZ and acknowledged the execution of the above and

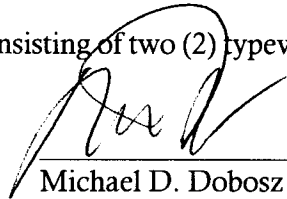
AMOUNT \$ 25-
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OVERAGE _____
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REVOCAION AND NOTICE OF REVOCAION (IGNACIO RODRIGUEZ)

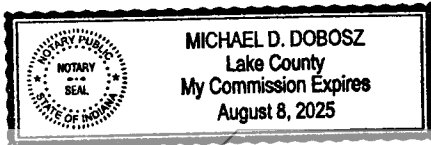
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foregoing Revocation and Notice of Revocation consisting of two (2) typewritten pages, this page included, on this 8th day of April, 2020.

My Commission Expires: 08/08/2025
My Commission Number: 702127



Michael D. Dobosz - Notary Public
Resident of Lake County



**Document is
NOT OFFICIAL!**

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

STOP

**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.**

Michael D. Dobosz, Attorney at Law

THIS INSTRUMENT PREPARED BY:
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