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Prepared By:Shivam Chauhan RECORDING REQUESTED BY: Dovenmuehle Mortgage, Inc. 1 Corporate Drive,Suite 360 Lake Zurich,II 60047

AND WHEN RECORDED MAIL TO:

Dovenmuehle Mortgage, Inc.

1 Corporate Drive, Suite 360

Lake Zurich, IL 60047

Loan Number: 1457412730

Lender ID:74B

2020-089533

2020 Dec 8

8:32 AM

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

MORTGAGE RELEASE SATISFACTION AND DISCHARGE DOCUMENT 1S

IN CONSIDERATION of the payment and full satisfaction of all indebtedness secured by that certain Mortgage described below, BMO HARRIS BANK NATIONAL ASSOCIATION, holder of said Mortgage, does hereby release, satisfy, and discharge said Mortgage in full and does hereby consent that the same be canceled and discharged of record. Borrower(s): AKASH JOSHIAND KHUSHBU SHAH, HUSBAND AND WIFE Amount of Note: \$260,940.00 Date of Mortgage: 08/09/2019 Recording Date: 08/12/2019 Instrument No: 2019 054059 Book: N/A Page: N/A Property Address: 12914 MASSACHUSETTS STREET, CROWN POINT IN,46307 and recorded in the official records of LAKE County, State of Indiana affecting Real Property and more particular, described on said Mortgage referred to herein.

IN WITNESS WHEREOF, the undersigned has caused these presents to be executed on this date of 11/03/2020.

BMO HARRIS BANK NATIONAL ASSOCIATION

By: DAVID Q FAGAN, VICE PRESIDENT

Witness:

Kathy so

25-1643171 (21)

STATE OF Illinois
COUNTY OF LAKE

On 11/03/2020 Before me TRAVIS BONVILLAIN, Notary Public, personally appeared DAVID Q FAGAN, VICE PRESIDENT of

BMO HARRIS BANK NATIONAL ASSOCIATIONpersonally known to me (or proved to me on the basis of satisfactory evidence), to be the person

whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument, the person or entity upon behalf of which the person acted, executed the instrument. Witness my hand and official seal. laffirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security Number in this document unless required by law.



CERTIFICATE OF PROOF

withess to the signature (s) on the foregoing instrument to which this Proof is attached.	
Margarita Maleuroki Witness Signature	
Margarita Malewski	
Witness Printed Name	
PROOF:	
STATE OF TUINOIS	
COUNTY OF	
Before me a Notary Public in and for said County and State, Dated on personally appeared the above-named WITNESS to the foregoing instrument, who, being by duly sworn, did depose and say that he/she knows WITNESS-Proceed in and who executed the foregoing instrument: that said WITNESS was present and saw said GRANTOR(S)-	_to
the same: and the said WITNESS at same time subscribed his/her name as a witness thereto	
NOTARY PUBLIC SIGNATURE TINA M. GOODWIN NOTARY PRINTED NAME Notary Name exactly as Commission Notary Public- State of Seal My Commission Expires: 1-13-7024 Commission No: 913358	