NOT AN OFFICIAL DOCUMENT

GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2021-017586

9:02 AM 2021 Feb 28

SATISFACTION OF MORTGAGE/LIEN RELEASE

Recording Requested By: Centier Bank 600 E. 84th Ave. Merrillville, IN 46410

> When Recorded Mail To: Centier Bank

Attn: Loan Servicing 600 E. 84th Ave. Merrillville, IN 46410

State of Indiana

MIN: 1005379-0000020278-9

MERS Phone: 1-888-679-6377

KNOW ALL MEN BY THESE PRESENTS that Mortgage Electronic Registration Systems, Inc., as nominee for the beneficial owner, whose address is P.O. Box 2026, Flint MI 48501-2026, holder of a certain mortgage, whose parties, dates and recording information are below, does hereby acknowledge that the beneficial owner has received full payment and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said mortgage.

Mortgagor: Mathew Laroche

Mortgagee: Mortgage Electronic Registration Systems, Inc. as nominee for Centier Bank, its Successors and Assigns

Dated: June 21, 2016

Date Recorded: June 28, 2016

Document/Instrument#: 2016 039840

Book/Liber/Reel#: N/A County: Lake

Page No.: N/A State: Indiana

Legal Description: LOT 58, EXCEPT THE NORTH 5 FEET THEREOF, IN FOUNTAIN RIDGE 2ND ADDITION, UNIT 4, TO THE CITY OF CROWN POINT, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 44, PAGE 37, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

APN #: 45-12-33-154-010.000-029

IN WITNESS WHEREOF, the said Mortgage Electronic Registration Systems, Inc., by the officer duly authorized, has duly executed the foregoing instrument on February 5, 2021.

Mortgage Electronic Registration Systems, Inc.

Muly Myly Michael McKean Assistant Secretarty

State of Indiana, County of Lake, SS

On February 5, 2021, before me appeared Michael McKean, personally known to me to be the Certifying Officer of Mortgage Electronic Registration Systems, Inc. of Centier Bank, who resides at P.O. Box 2026, Flint, MI 48501-2026, and that he signed this Satisfaction of Mortgage pursuant to the authority of said organization, as his free and voluntary act and deed, and as the free and voluntary act and deed of said organization, for the uses and purposes therein set forth.

> Walker Notary for the State of Indiana. Witness my hand and seal: AUM MALLE

This instrument prepared by Sue Przybylinski, Centier Bank, 600 E. 84th Ave., Merrillville, IN 46410. 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.

Superposition Superposition** Superpositio

Return Release To: Centier Bank, Attn: Loan Servicing, 600 E. 84th Avenue, Merrillville, IN 46410

"Official Seal" Susan Marie Przybylinski tary Public, State of Indiana Resident of Porter Co., IN mmission expires August 17, 2025

NOT AN OFFICIAL DOCUMENT

EXECUTED AND DELIVERED in my presence:	
(Inplem [Witness's Signature]	
Witness: Jane Compton [Witness's Printed Name]	
STATE OF INDIANA)	
) SS:	
COUNTY OF LAKE)	
Before me, a Notary Public in and for said County and State, personally appeared _Jane Compton_	
[Witness's Name], being known to me to be the person whose name is subscribed as a witness to the	
foregoing instrument, who, being duly sworn by me, deposes and says that the foregoing instrument	
was executed and delivered by _Angela Enright [Grantor's or other Signer's Name] in the above-	
named subscribing witness's presence, and that the above-named subscribing witness is not a party to	
the transaction described in the foregoing instrument and will not receive any interest in or proceeds	
from the property that is the subject of the transaction.	
Witness my hand and Notarial Seal this day of	
Juli Mulholland	
[Notary Public's Signature]	
Teri Mulholland TERI MULHOLLAND	
[Notary Public's' Printed Name] [Notary Public's' Printed Name] Commission Number 0724182	
Notary Public - State of Indiana My Commission Expires	
Residing in Lake County	
My Commission Expires: December 19, 2027	
Commission No0724182	
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 lawSue Przybylinski[Preparer's Name]	
Instrument prepared by:Sue Przybylinski 219-755-0670 Ext 5130	