## NOT AN OFFICIAL DOCUMENT INFORMATION REQUEST State Form 55241 (4-13)

INFORMATION State Form 55241 (4-13)					

FOLLOW INSTRUCTIONS

4. DELIVERY INSTRUCTIONS (Request will be contained)
4a. Pick Up

B. E-MAIL CONTACT AT FILER (optional)				
		GINA PIMENTEL		
C. RETURN TO: (Name and Address)	-	RECORDER	2023-0	023964
THE PAPER CHASE OF NORTHW	EST INDIANA INC	STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED	10:59 AM	2023 Aug 10
L 0,		THE ABOVE SPACE IS FOR	FILING OFFICE US	SE ONLY.
DEBTOR'S NAME to be searched. Provide only one Deb	tor name (1a or 1b) (Use exact, full nam	e; do not omit, modify, or abbreviate any part of the L	Debtor's name.)	
1a. ORGANIZATION'S NAME SS MUNSTER 45TH STREET,	HC			
Th. INDIVIDUAL'S SURNAME	LLC			
1				
INDIVIDUAL'S FIRST PERSONAL NAME	)xC			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	//			SUFFIX
Select one of the following two options: AL  2c. SPECIFIED COPIES ONLY CERTIFIED  AL  CERTIFIED  CE	LL JUNLAPSED ED (Optional)	0,		
2c. SPECIFIED COPIES ONLY CERTIFIER  Record Number Da	ED (Optional) Ite Record Filed (if required)	Type of Record and Additional Ident		(if required)
2c. SPECIFIED COPIES ONLY CERTIFIE  Record Number Da	Ite Record Filed (if required)	Type of Record and Additional Ident		(if required)
Record Number   Da	te Record Filed (if required)	Francing Sta	tement	(if required)
2c. SPECIFIED COPIES ONLY ☐ CERTIFIE  Record Number ☐ Da  30 17 - 000 \$ 3 7  30 18 - 000 \$ 18  30 18 - 000 \$ 18	te Record Filed (if required)  10/19/17  10/10/19  10/3/18	Francing Sta A manana Francina S	tement	(if required)
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2c. SPECIFIED COPIES ONLY CERTIFI  Record Number  Da  10 10 - 000531  Do 18 - 000483  Do 18 - 000483  Do 18 - 000600  ADDITIONAL SERVICES:  THROUGH DATE:	ED (Optional)  Ite Record Filed (if required)  IV   PA/\gamma\)  IV   A/\gamma\)  IV   A/\gamma\)	Swaring Sta An emotive Francisco Americano Sindrous	tement totement Statement	<del>J-</del>
2c. SPECIFIED COPIES ONLY CERTIFI  Record Number Da  30 17 - 000537  30 18 - 000483  30 18 - 000483  30 18 - 000600  Da  ADDITIONAL SERVICES:  THROUGH DATE:	ED (Optional)  Ite Record Filed (if required)  IV   PA/\gamma\)  IV   A/\gamma\)  IV   A/\gamma\)	Swaring Sta An emotive Francisco Americano Sindrous	tement totement Statement	<del>J-</del>
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