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Doc#. 1830449030 Fee: \$52.00

Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 10/31/2018 09:14 AM Pg: 1 of 3

Recording Requested By: DAPHNE MEYER

When Recorded Mail To: DAPHNE MEYER NORTHMARQ CAPITAL PO BOX 458 KIMBERLING CITY, MO, 65686 (417) 447-2931

Loan #: 230234

T\$ Ref#: 0004290000001188



SATISFACTION OF MORTGAGE

IL/COOK - Addition of ID #'s: Inv #: 18793

Paid in Full: 09/20/2018

FOR THE PROTECTION OF THE OWNER, THIS RELEASE SHALL BE FILED WITH THE RECORDER OR THE REGISTRAR OF TITLES IN WHOSE OFFICE THE MORTGAGE OR DEED OF TRUST WAS FILED.

KNOW ALL MEN BY THESE PRESENTS and Athene Annuity and Life Company (fl//a Aviva Life and Annuity Company, fl//a American Investors Life Incurance Company, Inc.) holder of a certain Mortgage made and executed by 829 FOSTER (EVANSTON), L.L.C., AN ILUNOIS LIMITED LIABILITY COMPANY originally to AMERICAN INVESTORS LIFE INSURANCE COMPANY, INC., A KANSAS CORPORATION as described in said Mortgage in the County of COOK, and the State of Illinois, Dateu: 9/4/2008, Recorded: 12/12/2008, Document #: 0834718014, does hereby acknowledge that it has received full paymant and satisfaction of the same, and in consideration thereof, does hereby cancel and discharge said Mortgage.

Property Address: 827-833 FOSTER ST, EVANSTON, IL, 60201

Parcel No.: 11-18-104-019-0000

Legal Description:

THE WEST 24.00 FEET OF LOT 10 AND ALL OF LOT 11 IN BLOCK 2 IN V'HEFLER AND OTHERS SUBDIVISION OF THAT PART OF THE NORTH ½ OF THE NORTHEAST ½ OF THE NORTHWEST ¼ OF SECTION 18, TOWNSHIP 41 NORTH, RANGE 14, EAST OF THE THIRD PRIVAL MERIDIAN, LYING WEST OF SHERMAN AVENUE, IN COOK COUNTY, ILLINOIS.

Document References:

- ASSIGNMENT OF LEASES, RENTS AND INCOME Dated: 9/4/2008 from 829 FOSTER (EVAN) TON), L.L.C., AN ILLINOIS LIMITED LIABILITY COMPANY to AMERICAN INVESTORS LIFE INSURANCE COMPANY, INC., A KANSAS CORPORATION Recorded: 12/12/2008, Document #: 0834718015

IN WITNESS WHEREOF, the undersigned, by the officer duly authorized, has duly executed the foregoing in trument.

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Athene Annuity and Life Company, an Iowa Corporation (ffk/a Aviva Life and Annuity Company), (ffk/a American Investors Life Insurance Company, Inc.)

By: Athene Asset Management LLC, its investment adviser

Name: DANIEL BROW Title: VICE PRESIDENT, CML STATE OF **COUNTY OF** before me, Notary Public in and for , personally appeared DANIEL BROWN, VICE in the Srate of PRESIDENT, CML, Athene Asset Management LLC, its investment adviser, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to maintal he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature on the instrumant the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. WITNESS my hand and official seal, **Notary Expires:** ROE COMPTS OFFICE Document Prepared by: HEATHER MCCANDLESS, RICHMOND MUNROE GROUP, PO BOX 458, KIMBERLING, 211Y, MO, 65686 (417) 447-2931 IL/COOK

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

YAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAMAM	
A notary public or other officer completing this certificate document to which this certificate is attached, and not the	ate verifies only the identity of the individual who signed the ne truthfulness, accuracy, or validity of that document.
State of California)	
County of Los Angeles)	
OnOctober 2, 2018 before me,	Tamara Thérèse Johnson - Notary Public
Dele Delote IIIc,	Here Insert Name and Title of the Officer
personally appeared Daniel Brown	
The state of the s	Name(s) of Signer(s)
subscribed to the within instrument and acknowledge	
	I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
TAMARA THERESE JOHNSON NOTACY Public - California	WITNESS my hand and official seal. Signature
Ay Comm. Expires Jul 14, 2022	Signature of Notary Public
Place Notary Seal Above	0,
Though this section is optional, completing this	TIONAL information can deter alteration of the occument or form to an unintended document.
Description of Attached Document	
Title or Type of Document:	Document Date:
Number of Pages: Signer(s) Other Tha	n Named Above:
Capacity(ies) Claimed by Signer(s)	
Signer's Name:	Signer's Name:
☐ Corporate Officer — Title(s):	☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact	☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator	
Other:	
Signer Is Representing:	Signer Is Representing: