## **DISCHARGE OF LIEN**

KNOW ALL MEN BY THESE PRESENTS, that $\underline{\ }$			
Whose address is		,	
does hereby certify that a certain Lien dated			
whose address is	and		
Register's Office for the County of, on,	and State of Michigan, in Liber	, Page	
Is fully paid, satisfied and discharged.			
Dated this day of, 20			
Signed:			
By:			
STATE OF MICHIGAN ) )SS.			
COUNTY OF)			
The foregoing instrument was acknowledged be	pefore me this day of	, 20, by	
Notary Public  County Michigan			
County, Michigan My commission expires:	_		
Drafted by and when recorded return to:			