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PREPARED BY AND RETURN TO: Lynn Solomon, Esq. CITY OF FORT LAUDERDALE 100 N. Andrews Ave Fort Lauderdale, FL 33301

SATISFACTION OF MORTGAGE

KNOW ALL MEN BY THESE PRESENTS, that the CITY OF FORT LAUDERDALE, a Florida municipal corporation (hereinafter "Mortgagee"), the holder of a City of Fort Lauderdale Housing Recovery Program Modification of Residential Mortgage and Promissory Note given by Eddie J Roberson a single person, (hereinafter "Mortgagor"), dated June 12, 1996, and recorded June 18, 1996, at Official Records Book 25021, Page 646 as modified by that instrument recorded in Official Records Book 25701, Page 552 of the Public Records of Broward County, Florida, given to secure the sum of Twenty Two Thousand Twenty Dollars and 70/100 (\$22,022.70) on the following described property, situated, lying and being in Broward County, Florida.

Lot 21 & 22, Block C of Fort Lauderdale Land & Development Co.'s subdivision of Block 6, Town of Fort Lauderdale, According to the Plat thereof as recorded in Plat Book 1, Page 57 of the Public Records of Dade County, Florida, said land situate, lying and being in Broward County Florida.

Property Address:

833 NW 2nd Street

Fort Lauderdale, Florida, 33311

Mortgagee has received full performance of all obligations under said Mortgage and does hereby acknowledge satisfaction and discharge of said Mortgage and hereby directs cancellation of same of record.

Pursuant to Resolution No. 17-282 adopted by the City Commission of the City of Fort Lauderdale, Lee R. Feldman, City Manager, is authorized to execute this Satisfaction of Mortgage on behalf of the City of Fort Lauderdale, Florida.

Satisfaction of Mortgage City of Fort Lauderdale – Eddie J. Roberson

| WITNESSES: The light but Witness name - printed or typed | Lee R. Feldman, City Manager |
|--|--|
| Witness name - printed or typed | |
| STATE OF FLORIDA: COUNTY OF BROWARD: | |
| 3anua R/ , 2018, by L | acknowledged before me this 2 day of the R. Feldman, City Manager of the City of Fortation. He is personally known to me and did not |
| (SEAL) | Notary Public, State of Florida Signature of Notary taking Acknowledgment) |
| KERRY ARTHURS MY COMMISSION # FF953055 EXPIRES: January 24, 2020 | Name of Notary Typed, Printed or Stamped |
| | My Commission Expires: |
| | Commission Number |
| Approved as to form: Cynthia A. Everett, City Attorney | |

Satisfaction of Mortgage City of Fort Lauderdale - Eddie J. Roberson

Lynn Solomon, Assistant City Attorney



COMMISSION AGENDA ITEM **DOCUMENT ROUTING FORM**

Today's Date: __1/4/2018___

| DOCUMENT TITLE: Satisfaction of Mortgage – Eddie J. Roberson | |
|--|--|
| COMM. MTG. DATE: <u>12/19/2017</u> CAM #: <u>17-1463</u> ITEM #: <u>CR-2</u> CAM attached: ⊠YES □NO | |
| Routing Origin: CAO Router Name/Ext: Shaniece Louis / Ext. 5036 | |
| CIP FUNDED: YES NO Capital Investment / Community Improvement Projects defined as having a life of at least 10 years and a cost of at least \$50,000 and shall mean improvements to real property (land, buildings, or fixtures) that add value and/or extend useful life, including major repairs such as roof replacement, etc. Term "Real Property" include: land, real estate, realty, or real. | |
| 2) City Attorney's Office # of originals attached: Approved as to Form: \(\subseteq YES \subseteq NO \) | |
| Date to CCO: | |
| 3) City Clerk's Office: # of originals: Routed to: Gina Ri/CMO/X5013 Date:/5//8 | |
| 4) City Manager's Office: CMO LOG #: Jan 19 Date received from CCO: 1 5 16 Assigned to: L. FELDMAN S. HAWTHORNE C. LAGERBLOOM L. FELDMAN as CRA Executive Director | |
| ☐ APPROVED FOR LEE FELDMAN'S SIGNATURE ☐ N/A FOR L. FELDMAN TO SIGN | |
| PER ACM: S. HAWTHORNE (Initial/Date) C. LAGERBLOOM (Initial/Date) Denoted Pending Approval (See comments below) Comments/Questions: | |
| Forward originals to Mayor CCO Date: | |
| 5) Mayor/CRA Chairman: Please sign as indicated. Forward originals to CCO for attestation/City seal (as applicable) Date: | |
| INSTRUCTIONS TO CLERK'S OFFICE | |
| City Clerk: Retains 0 original and forwards 1 original(s) to: Claudia Goncalves/ HCD/ Ext. 6024 (Name/Dept/Ext)**the original will be returned once recorded** | |
| Attach certified Reso # TYES NO Original Route form to CAO | |

please email an executed copy to Shaniece Louis *