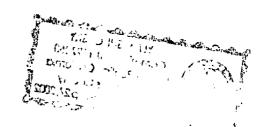
Sent By: LOEWENBERG & ASSOC; 3124401422; Feb-14-00 10:39; Page 1/1 國 002 02/11/2000 FRI 16:40 FAX 311 4046/0030 39 005 Page 1 of STATE OF CALIFORNIA 2000-07-18 09:55:11) ss. Cook County Recorder COUNTY OF LOS ANGELES 00 JUL 17 PM 2: 44 POWER OF ATTORNEY 1240 ATS We, Vladimir Shlionsky and Irina Shlionsky, his wife, residing at 6639 Colgate Avenue, Los Angeles, California 90048, hereby appoint Vladimir Vozovoi, of Glenview, Illinois, as our true and lawful attorney-in-fact for us and in our name, place, and stead, and on our behalf, for our use and benefit with respect to mortgaging of real estate commonly known as 612 Spruce Street, Glenview, Illinois, P.I.N. 04-34-413-020, and hereby authorize our said attorney to execute and deliver any instrument required; and further, to receive and disburse proceeds of said mortgage disbursement; to execute any and all documents or instruments as may be required by the COUNTY RECORDER mortgagee. Said property is legally described as follows: EUGENE "GENE" MOORE COUNTY: "COOK CITY: GLENVIEW **ROLLING MEADOWS** TAX NUMBER: 16. 34-413-020-0000 LEGAL DESCRIPTION: LOT 143 IN WYATT AND COOK'S COUNTRY PLACE UNIT NUMBER 5 BEING A SUBDIVISION OF PART OF THE SOUTHEAST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 34, TOWNSHIP 42 NORTH, RANGE 12 EAST OF THE THILD RINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. The undersigned do constitute our afformey with full power and authority to do and perform all and every act and thing whatsoever, required or necessary to be done with respect to the mortgage loan as fully and to all intent and purposes as we might or could do if personally present at the doing thereof, with full power of substitution hereby ratifying and confirming all that said attorney shall lawfully do or cause to be done by virtue thereof. Dated this 18⁷⁴ day of February, 2000. íliónsk: colley and mail to. OT IIAM STATE OF CALIFORNIA ladimirshlionsky) SS. 39 Colgate Avenue COUNTY OF LOS ANGELES LOSAngeles, CA 90048 The undersigned, a notary public, in and for said county do hereby certify that Vladimir Shiionsky and Irina Shlionsky, personally known to me to be the same persons whose persons are subscribed to the foregoing instrument, appeared before me this date, in person, and acknowledged that they signed, scaled and delivered their said instrument as their free and voluntary act for the use and purpose therein set forth. Given under my hand and seal this 187H de _day of February. YEFIM SHLIONSKY Commission # 1197053 My commission expires 9/24/2002 Notary Public - California Los Angeles County AV COMM. Expires Sep 27, 2002

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California	
1 1	ss.
County of Los ANGELES	555.
On FeBR. 18, 2000 before me	YEFIM SHUIDNSKY NOTABU RIGHI
Date	Name and Title of Officer (e.g., "Jane Doe, Notary Public")
personally appeared VVADIMIR o	TEFIM ShUTONSKY, Notary Rublic Name and Title of Officer (e.g., "Jane Doe, Notary Public") ShUTONSKY AND IBINA ShUTONSK Name(sylof Signer(s)
	X personally known to me
	proved to me on the basis of satisfactor
0,	evidence
10 miles	to be the personal whose manufaction
YETH SHLIONSKY YETH SHLIONSKY Commission # 1197053 Commission # Caffornia	to be the person(s) whose name(s) ir/are subscribed to the within instrument and
commission College	acknowledged to me that he have they executed
Notary Put is Called Notary Put is County Los Angeles County Los Angeles County 2002	the same in his/hes/their authorized
Notary Physics County Los Angeles County Any Comm. Expires S. p. 77, 2002	capacity(ies), and that by his/his/thei
	signature(s) on the instrument the person(s), o
	the entity upon behalf of which the person(s acted, executed the instrument.
	ViTNESS my hand and official seal.
	William and official scale
Place Notary Seal Above	Tilla Salmid
Flace Notary Seal Apove	Signature of Notary Public
	PTIONAL -
Though the information below is not required by le and could prevent fraudulent removal a	aw, it may prove valuable to persons relying on the document and reattachment of this form to a nother document.
Description of Attached Document	
Title or Type of Document:	OWER of AttORNEY
Document Date: FEBB. 18, 200	Number of Pages: ONE
	. C.
Signer(s) Other Than Named Above:	N/A /S
Capacity(ies) Claimed by Signer Signer's Name: <u>リレルdエアバア </u>	
Signer's Name: <u>UUAdImIR 3hUION</u>	5KY AND IBINA SHUDONSKYRIGHT THUMBPRINT
morridad.	OF SIGNER Top of thumb here
Corporate Officer — Title(s):	Top or digital field.
☐ Partner — ☐ Limited ☐ General ☐ Attorney in Fact	
∃ Automey in Fact ∃ Trustee	
Guardian or Conservator	
Other:	
Signer Is Representing:	

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