P. 02

ᲠᲘᲥᲔ७७७७४४४४ Limited Power of Attorney 578270194 18 001 Page 1 of 2001-08-07 11:39:37 WHEN RECORDED MAIL TO: C.T.I./R RECORDING DATA: Cook County Recorder 43.00 HomeSide Lending Inc. Attn: Custodial Liaison 3074
7301 Baymeadows Way Jacksonville, FL 32256 (Space above this line for recording date) KNOW ALL MEN BY THESE PRESENTS: United manage (the "Principal"), with its principle place of business at That 2005 Cholic Blud. Shokie I'd constitutes and appoints each and every one of the following seven (7) employees and/or officers of HomeSide Lending Inc ("HomeSide"), its true and lawful attorney-in-fact: Title with HomeSide Lending Inc Officer/Employee Bill Cary First Vice President Julia Wren Vice President Vice President Karen Garczynski Team Leader Bette Tolan Team Leader Cathy Forbes Team Leader Jennifer Loizzo **Operations Manager** Dan Guzman and in its name, place and stead and for its use and oe effit, to execute any and all documents for the purpose of assigning, and transferring to HomeSide that certain mortgage, deed of trust, security instrument and note, which note was table funded by HomeSide but closed in Principal's name, including but not limited to executing an assignment of mortgage, deed of trust, or security instrument and/or endorsing a promissory note and/or allonge for ab notlowing loan transaction: Losada Borrower(s) Name(s): 60402 Address of Property: HomeSide Loan Number: The Undersigned gives to said attorney-in-fact full power and authority to execute such instruments as if the undersigned were personally present, hereby ratifying and confirming all that said attorney-in-fact - half-lawfully do or cause to be done by authority hereof. IN WITNESS WHEREOF, this limited power of attorney has been executed this 27day of -76/4'S OFFICE (Space below this line reserved for acknowledgment) State of County of personally appeared , before me personally known to me (or proved to me on this of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledges to see that before executed the same in his/her/their authorized capacity(ies) and that by of behalf of which the person(s) acted, executed the instrument. his/her/their signature(s) on the WITNESS my hand and off \$ "OFFICIAL SEAL" Signature: (Notorial Seal) ARKADY PECK Notary Public, State of Illinois My Commission Expires:

Revised 2/2001

Limited Power of Attorney (WESTERN REGION) My Commission Expires 06/15/02

BOX 333-CTI

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STREET ADDRESS: 3022 LINEAU FUE CIAL COPY

CITY: BERWYN

COUNTY: COOK

TAX NUMBER: 16-30-418-056-0000

LEGAL DESCRIPTION:

THE SOUTH 1/2 OF LOT 10 AND ALL OF LOT 11 IN BLOCK 1 IN KEEFE'S ADDITION TO LAVERGNE A SUBDIVISION OF THE SOUTH 20 ACRES OF THE SOUTHWEST 1/4 OF THE SOUTH EAST 1/4 OF SECTION 30, TOWNSHIP 39 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

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