

WARRANTY DEED
JOINT TENANCY

THE GRANTOR, MINAXI R. PARIKH,
widow, of the village of Niles,
County of Cook, State of Illinois,
for and in consideration
of TEN DOLLARS, (\$10.00)
and for other valuable
consideration in hand
paid, conveys and warrants
to MINAXI R. PARIKH, FALGUNI M.
SHAH AND KEYUR R. PARIKH, OF
8833 GRAND AVENUE, NILES, IL 60714,
the following
described Real Estate
situated in the County of Cook,
in the State of Illinois, to wit:



PARCEL 1: THE EAST 19.50 FEET OF THE WEST 60.30 FEET OF LOT 54 IN LARPEN GARDENS, BEING A SUBDIVISION OF PART OF THE SOUTH 1/2 OF THE SOUTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 14, TOWNSHIP 41 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 2: THE SOUTH 10.0 FEET OF THE NORTH 24.0 FEET OF LOT 54 (EXCEPT THE WEST 119.50 FEET) IN LARPEN GARDENS, BEING A SUBDIVISION OF PART OF THE SOUTH 1/2 OF THE SOUTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 14, TOWNSHIP 41 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 3: EASEMENTS FOR INGRESS AND EGRESS FOR THE BENEFIT OF PARCELS 1 AND 2, AS SET FORTH IN THE DOCUMENT NUMBER 17965264.

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.

Permanent Real Estate Index Number: 09-14-420-022.
Address of Real Estate: 8833 W. GRAND AVENUE, NILES, IL 60714.

Dated this 31st day of AUGUST, 2001.

Minaxi R. Parikh
MINAXI R. PARIKH

State of Illinois, County of Cook ss. I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY that MINAXI R. PARIKH is personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that she signed, sealed and delivered the said instrument at her free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.

Given under my hand and official seal, this 31st day of August, 2001.

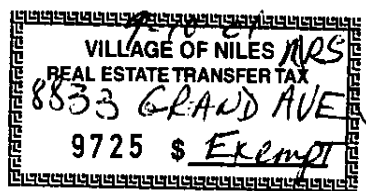
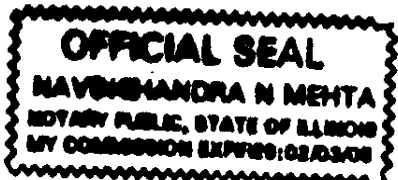
Commission expires: 02/03/05

[Signature]
NOTARY PUBLIC (NAVINCHANDRA N. MEHTA)

This instrument was prepared by Tushar Chotalia, Attorney at Law
6753 N. TRUMBULL AVENUE, LINCOLNWOOD, IL 60712. (847)674-3616.

MAIL TO:
MINAXI R. PARIKH
8833 W. GRAND AVENUE
NILES, IL 60714

SEND SUBSEQUENT TAX BILLS TO:
MINAXI R. PARIKH
8833 W. GRAND AVENUE
NILES, IL 60714



UNOFFICIAL COPY

Property of Cook County Clerk's Office

UNOFFICIAL COPY
STATE OF ILLINOIS
CLERK OF THE CIRCUIT COURT
JANUARY 1, 2011

UNOFFICIAL COPY

11125483

PARCEL 1: THE EAST 19.50 FEET OF THE WEST 60.30 FEET OF LOT 54 IN LARPEN GARDENS, BEING A SUBDIVISION OF PART OF THE SOUTH 1/2 OF THE SOUTHWEST 1/4 OF THE SOUTHEAST 1/4 OF SECTION 14, TOWNSHIP 41 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

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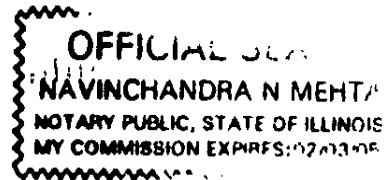
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The grantor or his agent affirms that, to the best of his knowledge, the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire title to real estate under the laws of the State of Illinois.

Dated 21st Sept, 192001 Signature: Minaxi R Parikh
Grantor or Agent

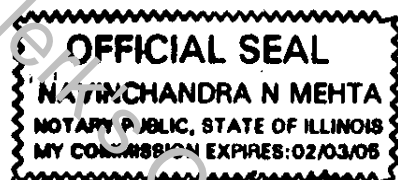
Subscribed and sworn to before me by the said Minaxi R. Parikh this 21st day of September, 192001.
Notary Public [Signature]



The grantee or his agent affirms and verifies that the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire and hold title to real estate under the laws of the State of Illinois.

Dated 21st Sept, 192001 Signature: [Signature]
Grantee or Agent

Subscribed and sworn to before me by the said FALGUNI M. SHAH & KEYUR R. PARIKH this 21st day of September, 192001.
Notary Public [Signature]



NOTE: Any person who knowingly submits a false statement concerning the identity of a grantee shall be guilty of a Class C misdemeanor for the first offense and of a Class A misdemeanor for subsequent offenses.

(Attach to deed or ABI to be recorded in Cook County, Illinois, if exempt under the provisions of Section 4, of the Illinois Real Estate Transfer Tax Act.)

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I HEREBY CERTIFY THAT the foregoing is a true and correct copy of the death record for the decedent in item 1 and that this record was established and filed in my office in accordance with the provisions of Illinois statues relating to the registrar of birth , stillbirth and death.

Date **MAY 25 2001**

Signed *Madeline Mc Curry*

At Cook County Department of Public Health Official Title Deputy Registrar
1010 Lake Street Suite 300 Oak Park, Illinois 60301

REGISTRATION DISTRICT NO. **16.0**
REGISTERED

STATE OF ILLINOIS
MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER

DECEASED-NAME **COOK** FIRST **PARKH** MIDDLE **EL** LAST **MALE** SEX **13 MAY 23, 2001** DATE OF BIRTH (MONTH, DAY AND NUMBER)

1. RACE **INDIA** 2. PLACE OF BIRTH **INDIA** 3. SOCIAL SECURITY NUMBER **10281-76-4878** 4. CITY, TOWN, TWP. OR ROAD DISTRICT AND NUMBER **11a. ENGINEER** 5a. **64** 5b. **1** 5c. **1** 5d. **24-1140**

6a. **PARK RIDGE** 6b. **LUTHERAN GENERAL HOSPITAL** 7. **INDIA** 8. **PARIKH** 9. **112**

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20a. DATE OF OPERATION, IF ANY **20b. MAJOR FINDINGS OF PREPARATION**
21a. (a) **CORONARY ARTERY DISEASE** (b) **DILATED VENTRICLES** (c) **HYPERTENSION**
21b. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, PLACE AND PLACE AND MODE TO THE CAUSE(S) STATED.
22a. SIGNATURE **SHAWN K. HUSAIN** TYPE OR PRINT **2447 W. TALCOTT** **CHICAGO IL 60631**
22b. NAME AND ADDRESS OF CERTIFIER (TYPE OR PRINT)
23. NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (TYPE OR PRINT)
24. CHICAGO ILLINOIS
25. GANGLA FUNERALS 2121 HALSEY DRIVE DES PLAINES, ILLINOIS 60018
26. I. LESLIE BALE
27. KAREN L. SCOTT, M.D.
28. REGISTERED
29. MAY 25 2001
30. 034-11404
31. MAY 25 2001