POWER OF ATTORNEY

I, RACHEL DUTHIE, of 120 Ridgegate Place #1020, Huntsville, Alabama 35801, appoint my attorney, GAEL MORRIS, a sample of whose signature appears below, my true and lawful agent and attorney, to act for me and in my name (in any way I could act in person) with reference to any interest in the real property located at 1829 W. OAKDALE, UNIT F, CHICAGO, ILLINOIS 60657, and the personal property contained therein (collectively referred to as the "Property"), to wit: SEE ATTACHED EXHIBIT "A"; with the power:

Nothing in this instrument shall be construed as imposing a duty on my attorney to act or assume responsibility for any matters referred to above or other matters even though my attorney may have power or authority to do so.

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2002-09-10 11:18:21
Cook County Recorder 28.50



HRST AMERICAN TITLE order # <u>C-159</u> 45 I documents, including without nts, closing statements, security

1. Real Estric Purchase. To execute any and all documents, including without limitation, all loan agreements, notes, affidavits, ALTA statements, closing statements, security agreements and mortgages, and all documents required by the title company, to acquire and purchase the Property (which term includes, without limitation, real estate subject to a land trust and all beneficial interests in and powers of direction under any land trust, and related improvements, alone or with others, trust agreements, associations, or agency agreements, or otherwise) located at 1829 W. OAKDALL, JMIT F, CHICAGO, ILLINOIS 60657, whether in fee, a reversion, a remainder, a life estate, or otherwise, contract regarding the purchase of the real estate and all interests in said real estate now owned by me, and otherwise deal with said real estate; collect all sale proceeds and earnings hor real estate; to sign any and all documents in order to convey or transfer the real estate, including without limitation, loan documents and agreements, on my behalf and in my stead; and, in general, exercise all powers with respect to real estate which I could if present and under no disability,

My attorney shall exercise or omit to exercise the powers and authorities granted in this power of attorney in each case as my attorney in my attorney's own absolute discretion deems desirable or appropriate under existing circumstances. I ratify and confirm all that my attorney, and any agents and attorneys appointed by my attorney, and their agents, associates and substitutes, may do by virtue of this instrument. Nothing in this instrument is shall be construed as imposing a duty on my attorney to act or assume responsibility for any matters referred to above or other matters even though my attorney may have power or authority to do so.

If any power or authority conferred upon my attorney shall be invalid or unexercisable for any reason, or not recognized by any person, agency, state, government, governmental unit, other legal entity, or organization dealing with my attorney, the remaining powers and authorities given to my attorney shall continue in full force and effect.

Each person, partnership, corporation, agency, state, government, governmental unit, other legal entity, or organization relying or acting upon this power of attorney shall be entitled to assume that this power of attorney is in full force and effect unless written notice has been given by me to such person or entity that this power has been revoked. In addition, revocation of the appointment of my attorney shall not be effective until my attorney has received actual notice of revocation by delivery to my attorney of such revocation in writing from me; until such receipt of such notice, my attorney shall not be liable to me or to any person or entity for any action taken by my attorney.

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No person, partnership, corporation, agency, state, government, governmental unit, or other legal entity relying upon this power of attorney shall be required to see to either the application or disposition of any monies, bills, notes, policies, other proceeds, or other property paid to or delivered to my attorney, or my attorney's substitute, pursuant to the provisions of this power of attorney.

It is my intent that this power of attorney shall remain in full force and effect for the period commencing on AUGUST 27, 2002 through and including OCTOBER 31, 2002, and that the powers granted herein shall continue without interruption during such period, regardless of whether I become disabled, incapacitated, or incompetent and, in such an event, despite an adjudication of incompetency or disability by any court and the appointment by such court of a guardian of my person or estate.

My attorney shall be reimbursed for all reasonable expenses incurred in connection with services hereunder and may charge reasonable compensation for services. My attorney may resign by written notice to me.

My attorney shall be liable only for willful default, not for errors of judgment, and shall have power to bind me or my property without binding my attorney personally.

My attorney may employ any legal firm of which my attorney may be a member and pay both such firm reasonable compensation for services.

Reproductions of this executed original (with reproduced signatures and the certificate of acknowledgment) shall be deemed to be original counterparts of this power of attorney.

Specimen signature of my attorney:

GAEL MORRIS

Date

Date

I certify to the correctness of the signature of my atto ney and I execute this power of attorney on AUGUST ______, 2002.

By: RACHEL DUTHIE

STATE OF ILLINOIS)

COUNTY OF COOK)

The undersigned, a notary public in and for the above county and state, certifier that **RACHEL DUTHIE**, personally known to me to be the same person whose name is subscrined to the foregoing power of attorney, appeared before me in person and acknowledged that she signed and delivered the instrument as her free and voluntary act, for the uses and purposes therein set forth.

SUBSCRIBED AND SWORN TO before me

this 28 day of August, 2002.

This document was prepared by:

Gael Morris

· Lawrence & Morris

2835 North Sheffield Ave - Suite 232

Chicago, Illinois 60657

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EXHIBIT "A"

LEGAL DESCRIPTION:

Parcel 1:

Unit 1829-F, together with its undivided percentage interest in the common elements in the Landmark Village Condominium as delineated and defined in the Declaration recorded as Document 94667604, in the Northeast 1/4 of Section 30, Township 40 North, Range 14 East of the Third Principal Meridian, in Cook County, Illinois.

Parcel 2:

Perpetual non-exclusive easement to and for the benefit of Parcel 1 for ingress and egress in, to, over and across lots 21, 22, as created and so, forth in the Plat of Resubdivision for Landmark Village, Unit One recorded as document number 94658101.

PROPERTY COMMONLY KNOWN AS:

1829 W. OAKDALE, UNIT F, CHICAGO, ILLINOIS

C/O/A/S O/A/CO

60657

PROPERTY IDENTIFICATION NUMBER:

14-30-222-173-1012

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