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Eugene "Gene" Moore Fee: \$32.00

Cook County Recorder of Deeds Date: 06/23/2004 08:28 AM Pg: 1 of 5

MARQUIS TITLE TM 143498 0401941

STEWART TITLE OF ILLINOIS 2 N. LASALLE STREET **SUITE 1920** CHICAGO, IL 80802

(The above space for Recorder's use only)

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

(NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE [YOUR "AGENT"] BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS. BUT WHEN A POWER IS EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT CO-AGENTS. UNLESS YOU EXPRESSLY LIMIT THE DURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR BEHAL! TERMINATES IT, YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART. THAT LAW EXPRESSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTORNEY YOU MAY DESIRE. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.) 5 JG

Power of Attorney made this 27 day of April, 2004.

I, Alex Lyubelsky and Antoniepta Lyubelsky and Jerry Lyubelsky and Maria Lyubelsky of, Carn Stream, IL 60188, hereby appoint: Bradley 5. Byrow as my attorney-in-fact (my "agent") to act for me and in my name (in any way I could act in person) with respect to the following power, as defined in Section 3-4 of the "Statutory Short Form Power of Attorney for property Law" (including all amendments), but subject to any limitations on or additions to the specified powers inserted in paragraph 2 or 3 below.

(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATEGORIES OF POWERS YOU DO NOT WANT YOUR AGENT TO HAVE. FAILURE TO STRIKE THE TITLE OF ANY CATEGORY WILL CAUSE THE POWERS DESCRIBED IN THAT CATEGORY TO BE GRANTED TO THE AGENT. TO STRIKE OUT A CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)

(a) Real estate transactions. (b) Financial institution transactions. (c) Stock and bond transactions. (d) Tangible personal property transactions. (e) Safe deposit box transactions. (f) Insurance and annuity transactions.	(g) Retirement plan transactions (h) Social Security, employment an Military service benefits. (l) Tax matters. (j) Claims and litigation. (k) Commodity and option transactions.	(f) Business operations. d (m) Borrowing transactions. (n) Estate transactions. (o) All other property-powers and transactions
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(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW.)

- 2. The powers granted above shall not include the following powers or shall be modified or limited to the following particulars (here you may include any specific limitations you deem appropriate, such as a prohibition or conditions on the sale of particular stock or real estate or special rules on borrowing by the agent): Executing, acknowledging and delivering all contracts, deeds, notes, trust deeds, mortgages, assignments of rent, waivers of homestead rights, affidavits, bill of sale and other instruments necessary to purchase: 1803 Dumont, Schaumburg, Il 60194
- 3. In addition to the powers granted above, I grant my agent the following powers (here you may add any other delegable powers including, without limitation, power to make gifts, exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below):

(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THE AGENT TO PROPERLY EXERCISE THE POWERS GRANTED IN THIS FORM, BUT YOUR AGENT WILL HAVE TO MAKE ALL DISCRETIONARY DECISIONS. IF YOU WANT TO GIVE YOUR AGENT THE RIGHT TO DELEGATE DISCRETIONARY DECISION-MAKING POWERS TO OTHERS, YOU SHOULD KEEP THE NEXT SENTENCE, OTHERWISE IT SHOULD BE STRUCK OUT.)

4. My agent shall have the right by written instrument to delegate any or all of the foregoing powers involving discretionary decision-making to any person or persons whom my agent may select, but such delegation may be amended or revoked by any agent (including any successor) named by me who is acting under this power of attorney at the time of reference.

(YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTORNEY. STRIKE OUT THE NEXT SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

5. My agent shall be entitled to reasonable compensation for so, vices rendered as agent under this power of attorney.

(THIS POWER OF ATTORNEY MAY BE AMENDED OR REVOKED BY YOU AT ANY TIME AND IN ANY MANNER, ABSENT AMENDMENT OR REVOCATION, THE AUTHORITY GRANTED IN THIS POWER OF ATTORNEY WILL &FCOME EFFECTIVE AT THE TIME THIS POWER IS SIGNED AND WILL CONTINUE UNTIL YOUR DEATH UNLESS A LIMITATION OF THE BEGINNING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER [OR BOTH] OF THE FOLLOWING:)

- 6. This power of attorney shall become effective on April 27, 2004 (insert a future date or event, such as court determination of your disability, when you want this power to first take effective on April 27, 2004
- 7. This power of attorney shall terminate on May 27, 2004
 (insert a future date or event, such as court determination of your disability, when you want this power to first take effect)

(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME[S] AND ADDRESS[ES] OF SUCH SUCCESSOR[S] IN THE FOLLOWING PARAGRAPH.)

8. If any agent named by me shall die, become legally disabled, resign or refuse to act, I name the following (each to act alone and successively, in the order named) as successor to such agent: Not Applicable.

For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor or an adjudicated incompetent or disabled person or the person is unable to give prompt and intelligent consideration to business matters, as certified by a licensed physician.

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(IF YOU WISH TO NAME A GUARDIAN OF YOUR PERSON OR A GUARDIAN OF YOUR ESTATE, OR BOTH, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY INSERTING THE NAME[S] OF SUCH GUARDIAN[S] IN THE FOLLOWING PARAGRAPHS. THE COURT WILL APPOINT THE PERSON NOMINATED BY YOU IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. YOU MAY, BUT ARE NOT REQUIRED TO, NOMINATE AS YOUR GUARDIAN[S] THE SAME PERSON NAMED IN THIS FORM AS YOUR AGENT.)

9. If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.

	10.	I am fully informed as to all the contents of this form and understand the full import of this grant of powers to m
agent.		As & Signed_
		Alex Lyub (isky (principal)
		(Matinista Leulesberg
		Antonietta Lyubelsky ()
		James Lynfelding
		Jerry Lyubelsky
		Maria ambelship
		Maria Lyubelsky (/

(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AND SUCCESSOR AGENTS TO PROVIDE SPECIMEN SIGNATURES BELOW. IF YOU INCLUDE SPECIMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU MUST COMPLETE THIS CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS.)

INTE CA.

Specimensignature of agent.

I certify that the signatures of my agent (and successor a ent) ire correct.

(agent)

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	UNITED IT IS NOTABIZED USING THE FORM BELOW)
THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE	UNLESS IT IS NOTARIZED, USING THE FORM BELOW)

STATE OF ILLINOIS

)SS

COUNTY OF Dupage

The undersigned, a notary public in and for the above county and state, certifies that Alex Lyubelsky and Antoniepta Lyubelsky and Jerry Lyubelsky and Maria Lyubelsky, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me in person and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth (and certifies to the correctness of the signature(s) of the agent(s).

Dated: April 27, 2004

"OFFICIAL SFAL"

DEAN G. GALANOPOULOS

Notary Public, State of Illinois Oly Commission Expires 10/11/17.005

My commission expires:

RU

The undersigned witness certifies that Alex Lyotelsky and Antoniepta Lyubelsky and Jerry Lyubelsky and Maria Lyubelsky, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and in set forth. Delieve him or her to be of scupe mind and memory.

Dated:

This document prepared by Dean G. Galanopoulos, 340 W. Butterfield Rd., #1A-Fimhurst, IL 60126 Sept of Office

Legal Description: see attached

Property Address: 1803 Dumont, Schaumburg, Il 60194

Permanent Tax Index Number:

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File Number: TM143498 JNOFFICA

Parcel 1: Unit 3, Area 5, Lot 7 in Sheffield Town Schaumburg, Unit 3, being a subdivision of part of the West 1/2 of the Northwest 1/4 of Section 17, Township 41 North, Range 10, East of the Third Principal Meridian, according to the plat thereof recorded May 21, 1971 as document 21487751, in Cook County, Illinois.

Parcel 2: Easement appurtenant to the above described real estate as defined and Declaration recorded October 23, 1979 as document 21488600, in Cook County, Illinois.

Commonly known as:

1803 DUMONT

SCHAUMBURG IL 60194

Cook County Clerk's Office