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Doc#: 0501805402 Eugene "Gene" Moore Fee: \$62.00

#### ILLINOIS STATUTORY SHORT FOR Cook County Recorder of Deeds Date: 01/18/2005 04:06 PM Pg: 1 of 6 POWER OF ATTORNEY FOR PROPE

(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 A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. 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 LATT THE DURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UN'IL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF 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 11 IS FORM IS A PART (SEE THE BACK OF THIS FORM). 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.)

POWER OF ATTORNEY made this 29 day of Novemb (month) 200 ligear). I, Alejandro JARVCHil C/Coster Bava 26-44-13 (insert name and address of principal) hereby appoint: 28ABEI NAVEIRAS VILAK, COSTA BRAVA, 26-4= B-61RONA 17005 (insert name and address of agent) as my attorney-in-fact (my "agent") to act for me and in my name (n any way I could act in person) with respect to the following powers, as defined in Section - of the "Saturory

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 or 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.

1st AMERICAN TITLE order # 1077 935

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- (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 and military service benefits.
- (i) Tax matters.
- (j) Claims and litigation.
- (k) Commodity and option transactions.
- (1) Busine operations
- (m) Borrowing ransactions.
- (n) Estate transcotions.
- (o) All other proper powers and transactions.

(LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW.)

The powers granted above shall not include the following powers or shall be modified or limited in the following particular: (eare 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):

It is only able to siwe everything. resulted to refinance of it condo and the advert of 9987 Lindo Lane 25, Des Plaines. Il 60016

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, powers or make gifts, exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below):

Only related to Refinance, a property.

(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

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SHOULD KEEP THE NEXT SENTENCE, OTHERWISE IT SHOULD BE STRUCK OUT.)

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.) My agent shall be entitled to reasonable compensation for services 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 BECOME EFFECTIVE AT THE TIME THIS POWER IS SIGNED AND WILL CONTINUE UNTIL YOUR DEATH UNLESS A LIMITATION ON THE BIG INNING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER OR BOTH) OF THE FOLLOWING:) ( ) This power of attorney shall become effective on December let 2004 . (insert a future date or event during your lifetime, such as court determination of your disability, when you want this power to first take effect). ( ) This power of attorney shall terminate on Jahnary 29th 2005 (insert a future date or event, such as court determination of your disability, when you want the power to terminate prior to your death) (IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.) If any agent named by me shall die, become incompetent, resign or refuse to accept the office of agent, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent: For purposes of this paragraph, 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 YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY RETAINING THE FOLLOWING PARAGRAPH. THE COURT WILL APPOINT YOUR AGENT IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)

If a guardian of my estate (my property) is to be as	pointed, I nominate the agent acting under this
power of attorney as such guardian, to serve without I	bond or security. I am fully informed as to all the
contents of this form and understand the full import of this grant of powers to my agent.	
Signed JARUCHIK IBANUJA	
(YOU MAY, BUT ARE NOT REQUIRED TO, RI	EQUEST YOUR AGENT AND SUCCESSOR
AGENTS TO PROVIDE SPECIMEN SIGNATUR	
SPECIMEN SIGNATURES IN THIS POWER OF	F ATTORNEY, YOU MUST COMPLETE
THE CERTIFICATION OPPOSITE THE SIGNA	ATURES OF THE AGENTS.)
Specimen signatures of	I certify that the signatures of my agent
agent (and successors)	(and successors) are correct.
Isabel Naveiras Vilar (agent)	Alejandro Jaruchik Ibanuja
(successor agent)	(principal)
(successor agent)	(principal)
	C
(THIS POWER OF ATTORNEY WILL NOT BE	E EFFECTIVE UNLESS IT IS NOTARIZED
AND SIGNED BY AT LEAST ONE ADDITIO	
BELOW.)	(0)
The Kingdom of Spain	
State of Province of Barcelona S.S.	
Consulate General of the 1.58	
County of United States of America	CO
The undersigned, a notary public in and for the abo	ove county and state, certifies that
Alejandro Jaruchik Ibantinewn to me to be the	
principal to the foregoing power of attorney, appeared	d before me and the additional witness in
person and acknowledged signing and delivering the	
principal, for the uses and purposes therein set for	th (, and certified to the correctness of the
signature(s) of the agent(s)). Dated: Nov. 29, 200	
	1 collect
	www act
	LINDA L. EICHBLATT
	CONSUL OF THE UNITED STATES

OF AMERICA

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Notary Public
My commission expires N/A. The undersigned witness certifies that Alejand
Jaruchik Ibanuja 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
purposes therein set forth. I believe him or her to be of sound mind and memory.
Pated: Nov. 29, 2004 (SEAL)
Nehemias Jaruchik Naveiras
(THE NAME AND ADDRESS OF THE PERSON PREPARING THIS FORM SHOULD BE
INSERTED IF THE AGENT WILL HAVE POWER TO CONVEY ANY INTEREST IN REAL
ESTATE)
This document was prepared by: 9 Mail to:
Alejandro Jarichik 9987 Lindaln # 20
Des Plaines, IL 60018
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Des Plaines, IL GOONS  Clants Office

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#### LEGAL DESCRIPTION - EXHIBIT A

Legal Description: Unit 9987-2S in Heritage Pointe Condominium as delineated and defined on the plat of a parcel of real estate falling in:

Part of the East 1/2 of the Northeast 1/4 and part of the East 1/2 of the Southeast 1/4 of Section 9, Township 41 North, Range 12, East of the Third Principal Meridian, in Cook County, Illinois.

Which survey is attached as Exhibit "A" to the Declaration of Condominium recorded March 2, 2001 as document number 0010170969, as amended from time to time, together with its undivided percentage interest in the common elements.

Permanent Index #'s: 09-09-403-068-1296 \\07 \rightarrow \09-09-403-068-1196 da Lane, c

Cook Collings Clerk's Office

Property Address: 9987 Linda Lane, Unit 2S, Des Plaines, Illinois 60016