T1: 02 7733050365 COK LLC CONTROL OF CONTROL 312 552 9002 P.02/04

Doc#: 0508814035 Eugene "Gene" Moore Fee: \$30.00 Cook County Recorder of Deeds Date: 03/29/2005 07:32 AM Pg: 1 of 4

The above space for recorder's use only

SPECIAL OR LIMITED DURABLE POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, Susan Helecon residing at 3488 (conflower Trail, Northbrook Tr have made, constituted and appointed and by these presente do make, constitute and appoint Tones & Heleson residing at 3488 Constours Trl. Dorthbrook, Di , my true and lawful agent and attorneyin-fact (hereinafter referred to as "attorney"), for me and in my name, place and stead to make, execute, acknowledge, amend, modily and deliver in my name such notes, agreements, promises to pay, affidavits, closing statements, contracts, instruments of conveyance, mortgage (including without limitation deeds of trust) or lease, and any and all other instruments, agreements and documents as my said attorney may deem appropriate and that are in may way related to any transaction involving the ownership, maintenance, financing, purchase and/cr scie of, or any matter in any way related to, the following described property (the "Property"):

SEE EXHIBIT "A" FOR LECAL DESCRIPTION

My attorney shall have power to exercise such other powers as may be necessary or desirable in the management of the Property, whether the same be of like kind of character to those herein enumerated or not, so long as related to the Property; in particular my said afterney is hereby enabled to act under changed conditions the exact nature of which cannot be foreseen, it wing intended to vest in my said attorney, and I do hereby vest in my said attorney, full power to control and manage the Property and hereby giving and granting to my said attorney full power and authority to co and perform all and every act and thing whatsoever requisite and necessary to be done in connection therewith as fully to all intents and purposes, as I might or could do if personally present, hereby ratifying and confirming whatsoever my said attorney shall or may do by virtue hercof.

All powers and authorities hereby granted may be exercised by my said attorney acting alone without the joinder of any other person.

This power of attorney shall not terminate on or be affected by the disability or incapacity of the principal. This power of attorney also shall not terminate or be affected by the lapse of time unless the loan contemplated hereunder is to be insured by the Federal Housing Administration.

The attorney named herein shall not be obligated to furnish bond or other security.

Any authority granted to my attorney herein shall be limited so as to prevent this power of attorney from causing my attorney to be taxed on my income and from causing my estate to be subject to

RESIDENTIAL TITLE SERVICES 1910 S. HIGHLAND AVE. SUITE 202 LCMBARD, IL 60148

a general power of appointment by my attorney, as that term is defined in Section 2041 of the Internal Revenue Code.

I hereby ratify and confirm all that my attorney, of his successors, shall lawfully do or cause to be done by virtue of the power of attorney and the rights and powers granted herein.

I hereby bind myself to indemnify my attorney herein named and any successors who shall so act against any and all claims, liabilities, demands, losses, damages, actions and causes of action, including expenses, costs and reasonable attorneys' fees which my attorney at any time may sustain or incur in connection with his/her carrying out the authority granted him/her in this power of attorney.

This power of attorney and the power herein granted shall terminate upon the earliest occurrence of (i) my death, (ii) revocation by an instrument in writing, duly executed and acknowledged by me and recorded or filed for record or filed for record in the office of the County Clerk or Recorder of the County and State in which the Property is located, or (iii) on 4/30/05 It is my intention that any person or any orm, corporation, joint venture, association of other legal entity of any kind or character dealing with my said attorney, or his/her substitute or substitutes, shall be entitled to rely on the provisions of this pace graph in determining whether or not this power of attorney has been revoked, and I hereby represent to those dealing with my said attorney, or his/her substitute or substitute, that they are entitled to rely upon the terms and provisions of this paragraph in determining whether this power of attorney has been revoked.

IN WITNESS WHEREOL, I have hereunto set my hand this Signature STATE OF ILLINOIS COUNTY OF COOK

BEFORE ME, the undersigned authority, a Notary Public in and for said County and State, on this day personally appeared Susur M Referson, known to me to be that pason whose name is subscribed to the foregoing instrument, and acknowledged to me that she executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL

Notary Public in

My Commission Expire

And for the State of

OFFICIAL SEAL CYNTHIA M VELEZ NOTARY PUBLIC - STATE OF ILLINOIS COMMISSION EXPIRES:08/07/07

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Sor known to me to be the same The undersigned witness certifies that DUSAN Pere 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. IN WITNESS WHEREOF, I have hereunder set my hand this Signature Printed Name STATE OF ULINOIS COUNTY OF COOK BEFORE ME, the undersigned authority, a Notary Public in and for said County and State, on this day personally appeared SUSAN MPETELSON, known to me to be that person whose name is subscribed to the foregoing instrument, and acknowledged to me that subscribed to the executed the same for the purposes and consideration therein expressed. GIVEN UNDER MY HAND ALD SEAL OF OFFICE this the day of ar / Public in and it the State of My Commission Expires: This Document was prepared by: Susan Feterson After recording please mail to:

0508814035 Page: 4 of 4

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EXHIBIT "A"

LOT 48 IN CITATION LAKE ESTATES UNIT NO. 3, BEING A SUBDIVISION IN SECTION 17, TOWNSHIP 42 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

PARCEL ID NUMBER: 04-17-303-016-0000

DWN A. OP COOP COUNTY CLORES OFFICE COMMONLY KNOWN AS: 3488 CORNFLOWER TRAIL NORTHBROOK, IL 60062