### **POWER OF ATTORNEY**

POWER OF ATTORNEY made this

10Aday August, 2005

Mail to:

Mail to:

RICHARD P. SORA

7101 M. CIUNO ALL

SUIR DI

LINCOLNUOUR, IZ 60712



Doc#: 0523526125 Fee: \$36.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 08/23/2005 03:20 PM Pg: 1 of 7

### 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 NO FICE 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 PAGPERLY. 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 BEHALF TERMINATI S 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 ATTORY EY FOR PROPERTY LAW" OF WHICH THIS 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 / On day of August , 2005. I, MARIA C. RODRIGUEZ, of 6160 N. Damen, #405, Chicago, Illinois 60659, hereby appoint: LUIS RODRIGUEZ, of 1462 W. Foster, Chicago, Illinois, 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 powers 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:

Se Services, Inc. Ottom Inia Guaranty, Inc.

(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.)

- (1) Real estate transactions.
- (2) Financial institution transactions.
- (3) Tangible personal property transactions.
- (4) Insurance and annuity transactions.
- (5) Tax matters.
- (6) Por owing transactions.
- (7) All other property 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.)

appropriate,	n the following particular, such as a prohibition or co	s there you may include at	ing powers and shall be modified by specific limitations you deem cular stock or real estate or special
rules on bor	rrowing by the agent):		
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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:

Real estate transactions. The agent is authorized to take any and all action necessary and to sign any and all documents required for the purchase and for the financing of the real estate commonly known as 1819 W. Thome, #N102, Chicago, Illinois 60660. (See legal descriptions attached hereto.) (This power also applies to real estate subject to a land trust and all beneficial interests in and powers of direction under any land trust). This power shall include the power to sign any and all mortgage documents required to finance the purchase of the real property commonly known as 1819 W. Thome, #N102, Chicago, Illinois 60660 and to sign any and all land trust documents including, but not limited to, a trust agreement and direction to execute documents.

(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 services rendered as agent under this power of attorney.

(THIS POWER OF ATTORNEY MAY BE AMENDED OR REVOKED BY YOU AT ANY TIME OR 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 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
(insert a	a future	date o	or event during your lifetime, such as court determ	nmarion of your disability, when
you wa	nt this	power	to first take effect.)	'S
(insert	7. a futur	( e date	) This power or attorney shall terminate on or event, such as court determination of your	disability, when you want this

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

power to terminate prior to your death.)

8. 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:	‡ 3
	•
For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor of 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.  (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 AR NOT REQUIRED TO, DO 3G 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 9 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)  9. If a guardian of my estate (my property) is to be appointed, I nominate the age acting under this power of attorney as such guardian to serve without bond or security.	E E E H T
10. I am fully informed as to all the contents of this form and understand the full imposit of this grant of powers to my agent.	ıπ
Signed (principal)	_
(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AN	۷D

(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 THE CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS.)

Specimen signatures of agent (and successors)	I certify that the signatures of my agent (and successors) are correct.			
(agent)	Maria O. Rodué nez (principal)			
(successor agent)	(principal)			
(successor agent)	(principal)			
(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW.)  STATE OF				
My commission expires $2-21-06$				

OFFICIAL SEAL RICHARD P SORA NOTARY PUBLIC STATE OF ILLINOIS MY COMMISSION EXP. FEB. 21,2006

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## **UNOFFICIAL COPY**

The undersigned witness certifies that MARIA C. RODRIGUEZ, known 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.

Date:	8-10-05	Somit Sona
		Witness

(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:

RICHARD P. SORA

Attorney at Law

7101 N. Cicero Avenue

Suite 201

Lincolnwood, Illinois 60712

Street Address:

1619 W. Thome, #N102 Chicago, Illinois 60660

### SEE ATTACHED LEGAL DESCRIPTION

The requirement of the signature of an additional witness imposed by this ar endatory Act of the 91st General Assembly applies only to instruments executed on or after the effective date of this amendatory Act of the 91st General Assembly.

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#### **EXHIBIT A**

Unit Number 11-102 as delineated on survey of part of Lots 1, 2, 3 and 4 and the North 20.50 feet of Lot 5 in Block 16 in Highridge, a Subdivision in the North 1/2 of the Northeast 1/4 of Section 6, Township 40 North, Range 14, East of the Third Principal Meridian, which survey is attached as Expide "A" to Declaration of Condominium Ownership made by Chicago Title and Trust Company, as Trustee under Trust Number 46620, recorded in the Office of the Recorder of Cook County. Illinois, as Document Number 20447143; together with an undivided 1.774 percent interest in said parcel (excepting from said parcel all the property and space comprising all the units thereof as defined and set forth in said Declaration and Survey), in Cook County, Illinois.

FOR INFORMATIONAL PURPOSES:

Ago, In Address: 1819 West Thomes Ave., Unit 102, Clacigo, IL

PIN: 14-06-208-006-1002

This commitment is invalid unless the Insuring Provisions and Schedules A and B are attached.

Schedule A consists of 2 page(s)