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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 A DUTY ON

Doc#: 0602555096 Fee: \$32.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 01/25/2006 11:04 AM Pg: 1 of 5

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 RUCORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IP IT FINDS THE AGENT IS NOT ACTING PROPURLY. 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 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 (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

1. I, RAMESH MOCHERLA

34237 COLLEEN TERRACE, PREEMONT, CALIFORNIA 94555

hereby appoint

JOHN T. CLERY, P.C.

1111 N. PLAZA DRIVE, SUITE 580, SCHAUMBURG, ILLINOIS 60173

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 addition to the specified powers inserted in

(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.)

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- (a) Real estate transactions.
- (b) Financial institution transactions.
- (e) Stock and bond transactions
- (d) Tangible personal property transactions.
- (c) 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 options transactions.
- (I) Business operations.
- (m) to rewing transactions.
- (n) Egy transactions
- (0) All of property powers and transactions.

(LIMITATIONS ON AND ADDITIONS TO THE AGENTS POWERS MAY BE INCLUDED IN THIS POWER OF ATTOMEY IF THEY ARE SPECIFICALLY DESCRIBED BELOW.)

2.		·· ''
4.	The powers granted above stall not include the following powers of following particulars (here you may include any specific limitation	
	following powers	or shall be madistall to the control
	following particulars (here you may include any specific limitation prohibition or conditions on the tale of particular stock or real pro-	or snan be modified of limited in the
	prohibition or conditions and the state any specific limitation	S Vou deem appropriate such as
	prohibition or conditions on the tale of particular stock or real estate agent):	Peropriate, such as
	agent);	te or special rules on horrowing by the
		The second of the
	<i>T</i>	
	77/4	_
	N/A	

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 attiend ary trust specifically referred to below):

I give my agent the specific authority to sign on my behalf any and al! 1. 20 documents and other documents needed to close the real estate transaction located at 1840 Huntington Bivd, Unit 203, Hoffman Estates, IL

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

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

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(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 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 12 705 (insert a future date or event during your lifetime, such as court determination of your disability, when you want this power to first take		
7.	(X) This power of attorney shall terminate on 1 9 1 (insert a future date or event, such as covered termination of your disability, when you want this power of attorney to terminate prior to your (IF YOU WISH TO NAME SUCCESSOR A STATE OF THE STATE OF T		
	(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)		
8.	name the following (each to 1ct alone and successively, in the order named) as successively.		
	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 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 SEVE YOUR BEST INTERSTS AND WELFARE. STRIKE OUT PARAGRAPH IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARDIAN.)		
	9. If a guardian of any 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 my agent.			
Signed X M Omul (principal)			
(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.)			
S	pecimen signatures of I certify that the signatures gent (and successors) of my agent (and successors) re correct.		
(a	gent) (principal)		

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(successor agent)	(principal)
(successor agent)	(principal)
(THIS POWER OF ATTORNEY WILL NOT BE SIGNED BY AT LEAST ONE ADDITIONAL W	
State of Illinois))SS. County of Cook)	
to the signature(s) of the	ness in person and acknowledged signing and deliver
Dated: 1 + 101	(SEAL)
NOTARY PUBLIC My commission expires 7 13 10 9	Official Seal Michelle Oddo Notary Public State of Illinois My Commission Expires 07/13/2009
The undersigned witness certifies that have whose name is subscribed as principal to the foregoing notary public and acknowled to the foregoing	
notary public and acknowledged signing and delivering principal, for the uses and purposes therein set forth. I Dated:	g the instrument as the free and voluntary act of the believe him or her to be of sound mind and memory,
Witness	
(THE NAME AND ADDRESS OF THE PERSON PRI IF THE AGENT WILL HAVE POWER TO CONVEY	EPARING THIS FORM SHOULD BE INSERTED ANY INTEREST IN REAL ESTATES
This document was prepared by: And MAIL 18	,
JOHN T. CLERY, P.C. 1111 PLAZA DRIVE SUITE :	580, SCHAUMBURG, ILLINOIS, 60173

This requirement of the signature of an additional witness imposed by the amendatory Act of the 91st General Assembly applies only to instruments executed on or after the effective date of June 9th, 2000.

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TICOR TITLE INSURANCE COMPANY

ORDER NUMBER: 2000 000578122 CH

STREET ADDRESS: 1840 HUNTINGTON BLVD. #BW-203

CITY: HOFFMAN ESTATES COUNTY: COOK COUNTY

TAX NUMBER: 07-08-101-020-0000

LEGAL DESCRIPTION:

UNIT NUMBER BW-203 IN THE TWELVE OAKS AT MORNINGSIDE CONDOMINIUM, AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED TRACT OF LAND:

LOT 2 IN THE MOUNINGSIDE PARK SUBDIVISION, A RESUBDIVISION OF LOT 1, EXCEPT THAT PART FALLING IN HUNTINGTON BOULEVARD AS DEDICATED BY PLAT OF DEDICATION RECORDED JANUARY 27, 1983 AS DOCUMENT NO. 26486555 AND REGISTERED JANUARY 27, 1983 AS DOCUMENT NO. LR3291502, IN HILL VIEW APARTMENTS, BEING A SUBDIVISION IN THE NORTHWEST 1/4 OF SECTION 3, TOWNSHIP 41 NORTH, RANGE 10 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCOUNTING TO THE PLAT THEREOF RECORDED JULY 6, 2005 AS DOCUMENT NUMBER 0518719033, IN COOK COUNTY, ILLINOIS;

WHICH SURVEY IS ATTACHED AS EXH(BIT "C" TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NUMBER 0527019)12; TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN (OCK COUNTY ILLINOIS.