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Doc#: 1010315045 Fee: \$48.00 Eugene "Gene" Moore RHSP Fee: \$10.00 Cook County Recorder of Deeds Date: 04/13/2010 11:25 AM Pg: 1 of 7

Return To:

LSI 700 Cherrington Pkwy Coraopolis, PA 15108

Prepared by Ryan Flaherty LSI 700 Cherrington Pkwy Coraopolis, P/. 15108

LSI # 7659638

LIMITED PURABLE POWER OF ATTORNEY

Borrower:

Cesare Gaglia: doni

Attorney in Fact:

Lanae Silvestri

Parcel/ Tax ID #

17-03-227-018-1096

-Ounity Clark's Offica

1010315045 Page: 2 of 7

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Prepared by/Return to: LSI Title Agency, Inc. Attn: Recording Department 700 Cherrington Parkway Coraopolis, PA 15108 # 7659638 Cyan Fluther Fr

LIMITED DURABLE POWER OF ATTORNEY

Caution: this is an important document. It gives the person whom you designate (your "Agent" also called "Attorney ir. Fact") broad powers for a specific transaction, to handle your property during a certain period of time, which may include powers to mortgage, sell or otherwise dispose of your real property without advance notice to you or approval by you. These powers will continue to exist even after you have become disabled or incompetent. This document does not extrorize anyone to make medical or other health care decisions. You may execute a different document, a health care proxy to do this. If there is anything about this form that you do not understand, you should ask an attorney to explain it to you.

BE IT KNOWN, that <u>Cesare Gagliardoni</u>, whose addruss is <u>2230 S. Bentley</u>, <u>Penthouse 1</u>, <u>Los Angeles</u>, <u>CA 90064</u> has made and appointed, and by these presents does make and appoint the following person, <u>Lanae Silvestri</u> whose address is <u>201 E. Chestnut St. # 19 B</u>, <u>Chicago</u>, <u>IL 60611</u> my/our true and lawful attorney in fact (also called agent) for them and in their name, place and stead, for the following specific and limited purposes:

- (1) Refinancing of Real Estate located at 201 E. Chestnut St. Apt. 19 B. Chicago, IL 60611, more fully described in Exhibit "A" attached hereto, and to be refinanced with US Rank, said refinancing to occur on or about _______ day of December, 2009 in an amount an amount not to exceed \$348, 323.00
- (2) To mortgage, finance, refinance, hypothecate, assign, transfer, and in any manner (es) with the real estate to effectuate the above referenced financing (which may also be called "banking transactions" under state statute);
- (3) To execute, acknowledge, and deliver escrow instructions, and all Closing Documents which including but not limited to: Notes, Deeds, Mortgages/Deeds of Trust, Subordinations, security instruments, riders, attachments and addenda, including any documents necessary or requested as part of this transaction by Title Insurer, Lender or the other parties to the transaction, those documents needed by governmental and taxing authorities, covenants, agreements and assignments of agreements, assignments of mortgages, assignments of deeds of trust, to secure the referenced indebtedness, lien waivers, encumbrance or waiver of homestead and any marital rights necessary to obtain the financing, settlement statements, truth in lending disclosures, loan applications, HUD 1 and other written instruments of whatever kind and nature, all upon such terms and conditions as said attorney in fact (also called agent) shall approve.

1010315045 Page: 3 of 7

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Further giving and granting said attorney in fact (also called agent), full power and authority to do and perform all and every act and thing whatsoever necessary to be done in and about the specific and limited premises (setout herein) as fully, to all intents and purposes, as might or could be done if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that said attorney in fact (also called agent) should lawfully do or cause to be done by virtue hereof.

This Power of Atorney shall become effective immediately, and shall not be affected by my subsequent disability, incapacity or lack of mental competence, except as may be provided otherwise by an applicable state statute. This is a Durable Power of Attorney. This Power of Attorney shall continue effective until my death. I may revoke this Power of Attorney at any time by providing written notice to my Attorney in Fact (also called agent), however such revocation shall not be effective as to third parties acting in reliance upon this Power of Attorney if recorded, unless and until the revocation is similarly recorded in the same county and state registry or other established records for the recording of Powers of Attorney. This Power of Attorney is limited to a specific refinance, and the powers noted shall continue only through and including any post closing corrections, amendments and follow up procedures, but shall cease when the refinance and all post-closing matters are fully accomplished.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMIL 2 OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

Dated	0,0~
E Hollmi	
Cesare Gagliardoni	
*One witness is required to sign for prop	erty in the state of Illinois.
Witness as to Cesare Gagliardoni Print name: Michael McMahan	Witness as to Cesare Gagliardoni Print name:
Specimen signature of Lanae Silvestri:	

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STATE OF California
COUNTY OF LOS Angeles
Defore me, Amil Connelly personally appeared Cesare Gagliardoni, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is are subscribed to the within instrument and acknowledged to me that he she/they executed the same or his/her/their authorized capacity(ies), and that by his/her/their aignature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of Cairfornia that the foregoing is true and correct.
WITNESS my hand and official seal. Signature (This area for official notarial seal)
APRIL CONNELLY COMM. # 1750403 NOTARY PUBLIC - CALIFORNIA LOS ANGELES COUNTY My Comm. Expires June 11, 2011
(witnesses), who is are personally known to me or who has produced as identification (or proved to me on the basis of satisfactory evidence) to be the person described in and who executed the foregoing Power of Attorney instrument and acknowledged before me that they executed the same, and desired the same be recorded as such.
WITNESS my hand and official seal in the county and state aforesaid this 10th day of
January, 2001 D.
APRIL CONNELLY COMM. # 1750403 NOTARY PUBLIC - CALIFORNIA LOS ANGELES COUNTY My Comm. Expires June 11, 2011

My Commission Expires: 06/11/11

1010315045 Page: 5 of 7

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ACKNOWLEDGMENT OF ATTORNEY-IN-FACT

I, <u>Lanae Silvestri</u>, have read the attached power of attorney and am the person identified as the attorney-in-fact (the "agent") for the principal. I hereby acknowledge that in the absence of a specific provision to the contrary in the power of attorney or in state law, when I act as agent:

I shall exercise the powers for the benefit of the principal.

I shall keep the assets of the principal separate from my assets.

I shall exercise reasonable caution and prudence.

Signature of Attorney-in-Fact

"OFFICIAL SEAL"
Gail Goldman
Notary Public, State of Illinois
Commission Expires 5/21/2011

I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the principal.

Date 13, 2010.
On the $\frac{134h}{134h}$ day of $\frac{3an}{134h}$ in the year $\frac{3an}{134h}$ before me, the undersigned, personally
appeared Lanae Silvestri, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to he within instrument as agent/attorney in fact and acknowledged to me that he/she/they executer the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the
person upon behalf of which the individual(s) acted, executed the instrument, and that such individual made such appearance before the undersigned in the city/township of, County of, State/Commonwealth of, State/Commonwealth of,
WITNESS my hand and official seal in the county and state aforesaid this/3 + day of
Jan. 13 ,200 10. Skil Goldman
Notary Public
My Commission Expires: 5/21/2011

1010315045 Page: 6 of 7

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AFFIDAVIT AS TO POWER OF ATTORNEY BEING IN FULL FORCE	
STATE OF cellinois)	
STATE OF <u>cllinous</u>) COUNTY OF <u>Cook</u>) SS.	
I/WE, Lanae Silvestri, being duly sworn, state:	
1. Lanae Silvestri ("Attorney-in Fact") of Cook County, Illinois, received a written Power of Attorney on/	
2. As attorney(s)-in-fact and under and by virtue of the Power of Attorney, I/we have this date executed the following described instrument (s):	
A mortgage with US Bank in the amount not to exceed \$ 348, 323. 00 with respect to property located at 201 E. Chestnut St. Apt. 19 B, Chicago, IL 60611.	
3. At the time of executing the above described instrument I/we had no actual knowledge or actual notice of revocation or termination of the Power of Attorney by death, disability or otherwise, or notice of any facts indicating the same.	
4. I/we represent that the principal is now alive; has not, at any time, revoked or repudiated the power of attorney; and the power of attorney still is in full force and effect.	
5. I/we make this affidavit for the purpose of inducing LSI/Chicago Title Insurance Company and Fidelity Title Insurance Company to accept deingly of the above described instrument, as executed by me/us in my/our capacity of attorney(s) in-fact for the Principal.	
Lanae Silvestri, Attorney-in-fact	
Acknowledged/Sworn to before me Gail Goldman this 13th day of January, 20010.	
Hail Hold more Notary Public	
My commission expires: $\frac{5/31/301/}{}$.	

"OFFICIAL SEAL"
Gail Goldman
Notary Public, State of Illinois
Commission Expires 5/21/2011

1010315045 Page: 7 of 7

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Order ID: 7659638

Loan No.: 2300000987

EXHIBIT A I FGAL DESCRIPTION

The following described property:

Unit Number 19B, as delineated on Survey of the following described parcel of Real Estate (hereinafter referred to as parcel): Lots 61, 81, and 82 (except the South 64 feet of Lots 81 and 82), in Lake Shore Drive Addition to Chicago, a Subdivision of part of Blocks 14 and 20 in the Canal Trustees Subdivision of the South Fractional Half of Section 3, Township 39 North, Range 14 East of the Third Principal Meridian, which Survey is attached as exhibit "A" to the Declaration of Condominium, made by La Salle National Bank, as trustee under Tract No. 31107, recorded in the Office of the Recorder of Cook County, Illinois, as Document No. 19772502; together with an undivided 0.9424 percent interest in saic parcel (excepting from said parcel all the property and space comprising all the Units as defined and set forth in said Declaration and Survey), in Cook Johns Clarks Office County, Illinois.

Assessor's Parcel Number:

17-03-227-018-1096