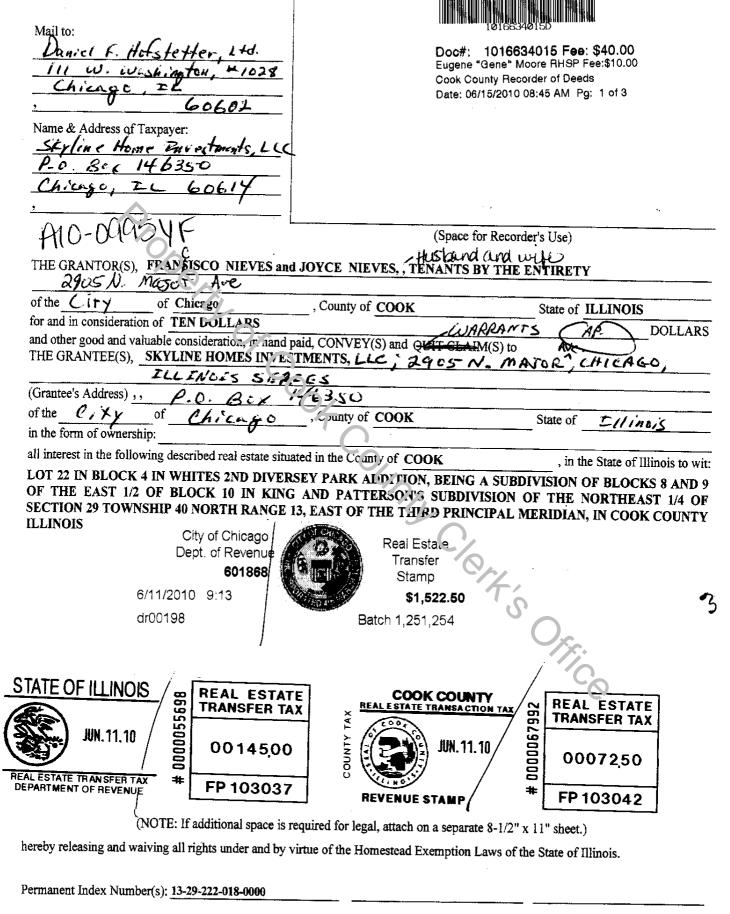
## WARRANTY NOFFICIAL COPY

ILLINOIS	STA	TUT	ORY
----------	-----	-----	-----

Property Address: 2905 N Major Ave, Chicago, IL 60634



1016634015 Page: 2 of 3

Dated this May day of May	CIAL _, 2010	COPY	
J 34 3 - J	leal)	Comusedi	(Seal)
(S	eal)	FRANSISCO NIEVES JOYCE NIEVES	(Seal)
(NOTE: Please typ	e or print names t	pelow all signatures.)	
STATE OF) ss			
COUNTY OF)			
I, the undersigned, a Notary Public in and for said County FRANSISCO NIEVES and JOYCE NIEVES AS TEN	, in the State aford NANTS BY THE	esaid, DO HEREBY CERTIFY THAT ENTIRETY	
personally known to me to be the same person(s) whose pain person, and acknowledged that he/she/they signed, sea for the uses and purposes therein set forth, including the re-		the said instrument as his/her/their free of the right of homestead.	and voluntary act
(Seal)	ŕ	My commission expires:	Notary Public
Ŋ	Colly	X.	· · · · · · · · · · · · · · · · · · ·
	5	Clark	
<del></del>	соок	COUNT? / ILLINOIS TRA	NSFER STAMP
Name & Address of Preparer: ANTHONY V. PANZICA ATTORNEY AT LAW		or  Exempt under provisions of Paragraph Section 4, Real Estate Transfer Tax AdDate:	1
2510 W. IRVING PARK ROAD CHICAGO , IL 60618			
		Buyer, Seller or Representative	<del></del>

<sup>\*\*</sup> This conveyance must contain the name and address of the Grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument (Chap. 55 ILCS 5/3-5022).

1016634015 Page: 3 of 3

## **UNOFFICIAL COPY**

## CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

State of California	)
County of San Diego	}
on May 18,2010 before me,	Debora J. Cole, Notary Public  Here Insert Name and Title of the Officer  ,
personally appeared Fransisco N	1 EVES
Joyce Nievi	Name(s) of Signer(s)
DEBORA J. COLE COMM. # 1669843 HOTARY PUBLIC-CALIFORNIA SAM DIEGO COUNTY MY COMM. EXP. MAY 25, 2010	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 in his/her/their authorized capacity(ies), and that by his/her/their signature(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 California that the foregoing paragraph is true and correct.
Place Notary Seal Above	WIT NESS my hand and official seal.  Signature
Though the information below is not required by law, it n and could prevent fraudulent removal and rea	nay prove valual ¹ು to persons relying on the document attachment of this forr , to ≀ nother document.
Description of Attached Document	
Title or Type of Document:	
Document Date: 5-18-10	Number of Pages
Signer(s) Other Than Named Above:	<u> </u>
Capacity(ies) Claimed by Signer(s)	
Signer's Name: Frank ISCO NI CUES Individual Corporate Officer — Title(s): Partner — Limited General Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing:	Signer's Name:

© 2007 National Notary Association • 9350 De Soto Ave., P.O. Box 2402 • Chatsworth, CA 91313-2402 • www.NationalNotary.org Item #5907 Reorder: Call Toll-Free 1-800-876-6827