

STATE OF ILLINOIS

Doc#: 1112245013 Fee: \$74.00 Eugene "Gene" Moore RHSP Fee:\$10.00

	matter of)	STATE OF	ILLINOIS	Cook County Recorder of Deeds
	ETTE COLLINS o 1152 W Fulton ! Chicago, IL 6060)	COUNTY OF COOK	Date: 05/02/2011 10:25 AM Pg: 1 of 6
	d,,,, 11 000)		ŕ	
FEDERAI	NOTICE L NATIONAL MORTG			VER OF ATTORNEY FOR ITIMORTGAGE, INC.	
That, I Power of STATE (unders contract FEDERAL the STA proper 60607 (owner 17-08- as 115)	of Attorney exect OF ILLINOIS and - igned Afficiant col cts with the corp L NATIONAL MORTGA ATE OF ILLINOIS, ty as described and within the ra identification in	Collins OBC uted by the that all so nstituted a poration of AGE ASSOCIA AND ALL AC at location ctis ands b unter 17-08 re the addr C Chicago,	e corporation of any of the COUNTATION, & CIGENTS OR HID to bounds as a count of the COUNTATION of the	ion of the COUNTY OF CO gregate subsidiaries an or the purpose set fort IY OF COOK and the corp ITIMORTGAGE INC, headqu IRESis hereby wholly re described as , 1152 W F attached to by the corp LO26 and property geogr Il mailing and by the U Executed and signed o in A.D. and with praise	r known as "Affiant") declare that all OK and with the corporation of the d employees thereof by which the h in said Power of Attorney thru all oration of the foreign COUNTY OF arter locations and the corporation of woked, cancelled and annulled for the ulton St. 3C BLOCK 103, Chicago, IL oration of the COUNTY OF COOK and for aphical identification NITED STATES POSTAL SERVICE is listed in this day and date of
Ву:	Justi Ren Signed-Affiant Viette Ren Printed Name-A		in MR	, A Natural And Liv	ing Woman
	1152 W. Ful Address-Affian		3C	- 040	
Witnes:	Printed Name-Wi-	tness KhW; itness 413 aug SAM	'El 41	RR	Clort's Office
	Printed Name-Winds Address-Witness	6296	Piven	forest, IZ	6030;

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My Commission Expires: april 15, 20, 4
/s/Claimant yvettellane Collin trak

Seal/Rt. Thumbprint

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NOTICE OF RESCISSION OF SIGNATURES

DATE: 4/21/2011

Subject: Recession of Signatures on APRIL 21, 2011
To: Whom It May Concern
1. Wett force Collin Att a woman and living soul contracted with G the light force Like & W. Agents + ilities ————————————————————————————————————
Because of these acts of threat, duress, and coercion, I hereby rescind any and all signatures that I placed on any and all forms, documents, contracts, and the like, acted upon on or about the state: APRIL 21.2011
All unconscionable contracts are subject to rescission under the common law for failure to make the proper disclosures in constitute an acceptance, where there is no meeting of the minds there is no contract as required by §226.23(b)(1) regarding notice of right to rescind as set forth in In re Pe of Maxwell v. Fairbanks Capital Corporation, 281
B.R.101, 2002 Bankr. Lexis 759. The UCC addresses unconscionability in §2-302.
I waive and reject any and all benefits express or implied arising from any such signatures, all resulting contracts, agreements or trust resulting from force, under threat of arms, involuntary servitude and peonage, committed against myself.
Note: The use of a Notary in this matter is only for verification purposes only, and should not be construed as legal advice.
NOTARY ACCEPTOR
The State of ILLINOIS) Commercial Oath and Verification)
The above named affiant, personally known to me, appeared before me a Notary, Affirmed and under Oath this 21 th day of APRIL 2011

Notary Witness

[Seal]

NEMA AKHU EL. My commission expires

APRIL 15, 2014

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Form **56** (Rev. December 2007)

Department of the Treasury Internal Revenue Service

Notice Concerning Fiduciary Relationship

OMB No. 1545-0013

(Internal Revenue Code sections 6036 and 6903)

Pa	art I	Identification						
Nan	ne of perso	on for whom you are acting (as shown or	the tax return)	Ide	ntifying number	Decedent's	social security	v no.
_		ENEE COLLINS	F80693182		52 947	-		
		son for whom you are acting (number, s	treet, and room or suite no.)					
		LTON AVE #3C						
		tate, and ZIP code (If a foreign address,	see instructions.)					
		IL 60607						
	iciary's nai	rgage- agents / Heirs						_
		ciary (number, street, and room or suite	20)					
		nology On re	110.)					
		tate, and ZIP Code			Tolophore sumb	/ · · · · · · ·		
O'F	Fallon, N	IO 63368-2 24()			Telephone number		340	
				· · · · · · · · · · · · · · · · · · ·	<u> </u>	283-79	118	
	art II	Authority				When with to safe	92- 24-	
1		ity for fiduciary relationship. Chec						
		VIII and codicils or court order ap	pointing fiduciary		(2) Date of death	**********		
	_	Court order appointing fiducia y	<i>c</i>		(2) Date (see inst	ructions)		
0	; 口()	alid trust instrument and amenda	1901: Al Recission no authori	TV EVIOTO TO				
d		Other. Describe CONTRACTU	AT THE COSSION. NO AUTHORI	IY EXISTS TO	OPERATE.	44		
_					1 1 2			
Pa	rt III	Nature of Liability and Tax	Notices					
3 4 5 6	Year(s) If the 1 describ If the fi of the	I tax form number (706, 1040, 1040, 1040, 1040, or period(s) (if estate tax, date of iduciary listed in Part I is the period on lines 2, 3, and 4, check he duciary listed in Part I is the persettems described on lines 2, 3, and s) applicable All 1099's, 1040v's	death) SINCE TRUSTS BII son to whom notices and other on to whom notices and other wr 4, check here	written commu	inications should			ali)
Do	at 117	Deve estimate Transit ()						_
Fa	rt IV	Revocation or Termination	of Notice		<i>'</i> \(\mathcal{G} \)			
		Se	ction A—Total Revocation or	Termination		····		_
7		this box if you are revoking or te e Service for the same tax matter	erminating all prior notices concers and years or periods covered l	arnina fiduaina	relation by	file with the	Internal	
_	1100301	to termination of fluuciary relation	onsnip. Check applicable box:		-	O		_
a b	☑ Cer	irt order revoking fiduciary authori	ity			C		
c	Oth	ifficate of dissolution or termination er. Describe ► SEE NOTICE OF	PROPERTY OF A DUSINESS ENTITY	01: 05 DOM:	n an	_		
		333113113231	Section B—Partial Revo	cation	H OF ATTORNE	<u>′ </u>		_
8a	Check	his boy if you are revoking andier	national and nevot	Callon				_
	the sam	his box if you are revoking earlier e tax matters and years or period	s covered by this notice concerns	tionships on file	with the Internal	Revenue Se	ervice for	
b	Specify	to whom granted, date, and addr	ress, including ZIP code	ng nduciary rei	ationship		▶	
	▶							
			·					
0	Charles	hin hav if a new Educt	Section C—Substitute Fig	uciary				
9	▶:Yvett	his box if a new fiduciary or fiducitie name(s) and address(es), inclue-Renee: Collins	ding zir code(s), of the new fide	uciary(ies)	revoking or termi		▶ [_ _
or -		V Fulton Avenue #3C Chicago,	minots near [60607]					- "
ur F	'aDefW^r	k Reduction Act and Privacy Act (Mada to					_

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rum so (n	ev. 12-2007)			Page 2	
Part V	Court and Administrative Proceedings				
Name of co	ourt (if other than a court proceeding, identify the type of proceeding	g and name of agency)	Date proceeding init	lated	
Address of	court	Docket number of proceeding			
City or tow	n, state, and ZIP code	Date	Time	a.m. Place of other proceedings	
				p.m.	
Part V	Signature				
	I certify that I have the authority to execute this notice concerning	g fiduciary relationship on beha	If of the taxpayer.		
Please Sign Here	Mateleree Collis are 1	lights Reserve	A	4/20/11	
	Fiduciany's signature	Title, if applicable		Date Form 56 (Rev. 12-2007)	
	Figurary's signature	Olynin Cle			

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Form **55**(Rev. December 2007)
Department of the Treasury

Notice Concerning Fiduciary Relationship

OMB No. 1545-0013

(Internal Revenue Code sections 6036 and 6903)

Part I	Identification					
	person for whom you are acting (as shown on the tax return)	ld	entifying number			security no
	E RENEE COLLINS		F80693182	345	52	9475
	f person for whom you are acting (number, street, and room or suite no.)					
	FULTON AVE #3C					
•	vn, state, and ZIP code (If a foreign address, see instructions.)					
	GO, IL 60607					
Fiduciary's						
	AL NATIONAL MORTGAGE ASSOCIATION- MCCALLA RAYN	MER,LLC / 'ET /	AL'			
	f fiduciary (full ber, street, and room or suite no.)					
	Fulton Ave #3C SYVEY					
			Telephone number		. **	
Unicag	o, IL 60608,4510 10067		(312)	368-	<u> 6200 </u>	
Part II	Authority			*		
1 Au	thority for fiduciary relationship. Check applicable box:		MAY 2 - 2	011		
a(1)			(2) Date of deat			
b(1) [(2) Date (see ins			
c [☐ Valid trust instrument and amendme its		(=, =====	recompension (C)		
d [Other Describe CONTRACTUAL RECISSION, NO AUTHO	RITY EXISTS	TO OPERATE.			
Part II	Nature of Liability and Tax Notices					
	Transfer and Tax Honors					
2 Ty	be of tax (estate, gift, generation-skipping transfer, income, excise,	etc.) > ALL R	ELATED TO REG	INA RICE		
3 Fee	deral tax form number (706, 1040, 1041, 1120, etc.)					• • • • • • • • • • • • • • • • • • • •
4 Ye	ar(s) or period(s) (if estate tax, date of death) > SINCE .PUST'S	BIRTH-CURRI	ENT DATE	• • • • • • • • • • • • • • • • • • • •	• • • • • • • •	• • • • • • • •
5 If t	he fiduciary listed in Part I is the person to whom notices and cur	or written comm	nunications should	l be cont fo	ar all it.	
des	scribed on lines 2, 3, and 4, check here	William Collin		· · ·		
	he fiduciary listed in Part I is the person to whom notices and other	With an commu	nications should be	ont force	 	
of	the items described on lines 2, 3, and 4, check here ► 📝 and li	ist the coolicable	e federal tax form	number an	ome (Di	n nor sii)
per	riod(s) applicable All 1099's, 1040v's and all other taxes					
Part I\	Revocation or Termination of Notice		17		-10	 .
LECITOR	A Revocation of Termination of Motice		<i>'</i> \(\mathcal{G} \)			
	Section A—Total Revocation	or Terminati	on			-
7 Ch	eck this box if you are revoking or terminating all prior notices co	ncernina fiducia	ary relationships or	ile with t	he Inte	rnel
Re	venue Service for the same tax matters and years or periods covere	ed by this notice	e concerning fiduci	೯.v relation	ship	.(ia) ▶ ☑
Rea	ason for termination of fiduciary relationship. Check applicable box:		Ü			
a 🗹	Court order revoking fiduciary authority					
b 🗹	Certificate of dissolution or termination of a business entity					
c 🗹	Other. Describe > SEE NOTICE OF RECISSION AND REVOC.	ATION OF POV	WER OF ATTORN	EY		
	Section B—Partial Re				· · · · · · · · · · · · · · · · · · ·	
8a Che	eck this box if you are revoking earlier notices concerning fiduciary	relationships on	file with the Intern	al Revenue	Sanda	for
the	same tax matters and years or periods covered by this notice conc	eming fiduciary	relationship	AT 1 TOYOTTUR	OCI VICE	; (Of ▶ □
b Spe	ecify to whom granted, date, and address, including ZIP code.	J - 22		• • •		-
0 0-	Section C—Substitute					
9 Che spe	eck this box if a new fiduciary or fiduciaries have been or will be secify the name(s) and address(es) including ZIP code(s), of the name	substituted for t	he revoking or terr	ninating fid	uciary	and
►:\	cify the name(s) and address(es), including ZIP code(s), of the new fvette-Renee: Collins					▶ □
	152 W Fulton Avenue #3C Chicago, Illinois near [60607]	• • • • • • • • • • • • • • • • • • • •				• • • • • • • • •
	rwork Reduction Act and Privacy Act Notice, see back page.		N. 400			
J. I apo		Cat.	No. 16375(Form	DO (Rev	. 12-2007)

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Form 56 (Re	v. 12-2007)			Page 2		
Part V	Court and Administrative Proceedings					
Name of cou	urt (if other than a court proceeding, identify the type of proceed	ding and name of agency)	Date proceeding initiated			
Address of o	court		Docket number of pr	roceeding		
City or town	, state, and ZIP code	Date		a.m. Place of other proceedings p.m.		
Part VI	Signature					
Please Sign Here	Lette Pere Collis are		. ,	4/24/11		
	fiquely's signature	Title, if applicable		Date		
	Hettelenee Collin ale refusives signature	County Cla	2750			