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LIMITED POWER OF ATTORNEY

Doc#: 1125042086 Fee: \$62.00
Eugene "Gene" Moore RHSP Fee:\$10.00
Cook County Recorder of Deeds
Date: 09/07/2011 01:20 PM Pg: 1 of 3

FIRST AND MIDDLE INITIAL

ORDER # 2196476 3084

KNOWN ALL MEN BY THESE PRESENTS that
Manisha Patel

has/have made, constituted, and appointed and BY THESE PRESENTS do make, constitute and appoint Julie L. Galassini true and lawful ATTORNEY for me/us and in mine/our names(s), place, and stead to transact all business, and make, execute, acknowledge, and deliver miscellaneous documents, notes, trust deeds, mortgages, assignments of rents, waivers of homestead rights, affidavits, bills of sale, and other instruments and to endorse and negotiate checks and bills of exchange requisite or proper to effectuate the refinance or purchase of the premises described as follows:

LEGAL DESCRIPTION: See exhibit A attached hereto and made a part hereof
PROPERTY TAX I.D.# 05 17-306-012-0000
PROPERTY ADDRESS: 1003 Vine Street
Winnetka, IL 60093

All as effectually in all respects as we could do personally, giving and granting unto said ATTORNEYS full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises, as fully, to all intents and purposes, as we might or could do if personally present at the doing thereof, with full power of substitution and revocation, hereby ratifying and confirming all that said ATTORNEY shall lawfully do or cause to be done by virtue thereof.

The powers afforded by this power of attorney shall expire on September 12, 2011.
Dated this 23 day of August, 2011.

Manisha Patel (Signature) (SEAL)
MANISHA PATEL
State of)
County of)
SS.

The undersigned, a notary public in and for the above county and state, certifies that Manisha Patel, known to me to be the same persons whose names are subscribed as principal to the foregoing power of attorney, appeared before me and the additional witness in person and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth (, and certified to the correctness of the signatures(s) of the agent(s).

Dated (SEAL)
Notary Public

My commission expires

The undersigned witness certifies that Manisha Patel known to me to be the same persons whose names are 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 them to be of sound mind and memory.

Dated 8-23-2011 (SEAL)
Witness Sue Galbreath (Signature)

Prepared by: Julie L. Galassini, Esq.
311 Whytegate Court
Lake Forest, IL 60045

Mail to: Chicago Bancorp, Inc.
300 North Elizabeth, Ste 3E
Chicago, IL 60607

Manisha Patel
1003 Vine St
Winnetka IL 60093

CALIFORNIA NOTARY
ALL-PURPOSE
ACKNOWLEDGEMENT
IS ATTACHED

S N
P 3
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SC Y
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CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Alameda

On 8-23-2011 before me, Patricia C. Luba, A Notary Public
(Here insert name and title of the officer)

personally appeared Manisha R. Patel

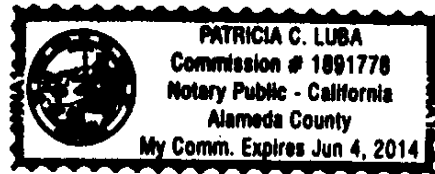
who proved to me on the basis of satisfactory evidence to be the person whose name is are subscribed to the within instrument and acknowledged to me that he she they executed the same in his her their authorized capacity , and that by his her their signature on the instrument the person , or the entity upon behalf of which the person 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.

WITNESS my hand and official seal.

Patricia C. Luba
Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Limited Power of Attorney
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date 8-23-11

(Additional information)

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this for a required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he/she/they~~, ~~is/are~~) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

CAPACITY CLAIMED BY THE SIGNER

Individual (s)

Corporate Officer _____
(Title)

Partner(s)

Attorney-in-Fact

Trustee(s)

Other _____

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LEGAL DESCRIPTION

Legal Description: LOT 9 IN OAK RIDGE SUBDIVISION, BEING A RESUBDIVISION OF BLOCK 13, IN COUNTY CLERK'S DIVISION OF THE SOUTH WEST 1/4 OF SECTION 17, TOWNSHIP 42 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS.

Permanent Index #'s: 05-17-306-012-0000 Vol. 0099

Property Address: 1003 Vine Street, Winnetka, Illinois 60093

Property of Cook County Clerk's Office