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Doc#: 1205512065 Fee: \$54.00 Eugene "Gene" Moore RHSP Fee:\$10.00

Cook County Recorder of Deeds Date: 02/24/2012 10:02 AM Pg: 1 of 9

# 850 W JACKSON SLVD., SUITE 320 CHICAGO IL 60607

ILLINOIS STATUTORY

SHOFT FORM

POWER OF ATTORNEY FOR PROPERTY

Prepared by:

Mail to:

Ollhin Clark's Office Sergei Danilon 412 N Marion St Apt 3B Ogk Park IL 60302

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#### **"NOTICE TO AGENT**

When you accept the authority granted under this power of attorney a special legal relationship, known as agency, is created between you and the principal. Agency imposes upon you duties that continue until you resign or the power of attorney is terminated or revoked.

As agent you must:

(1) do what you know the principal reasonably expects you to do with the principal's property;

(2) act in good faith for the best interest of the principal, using due care, competence, and diligence;

(3) keep a complete and detailed record of all receipts, disbursements, and significant actions conducted for the principal;

(4) attempt to r es arve the principal's estate plan, to the extent actually known by the agent, if preserving the plan is consistent with the principal's best interest; and

(5) cooperate with a parson who has authority to make health care decisions for the principal to carry out the principal's reasons of expectations to the extent actually in the principal's best interest As agent you must not do any of the collowing:

(1) act so as to create a conflict of in erest that is inconsistent with the other principles in this Notice to Agent:

(2) do any act beyond the authority granted in this power of attorney:

(3) commingle the principal's funds with your funds;

(4) borrow funds or other property from the principal, unless otherwise authorized;

(5) continue acting on behalf of the principal if you learn of any event that terminates this power of attorney or your authority under this power of attorney, such as the death of the principal, your legal separation from the principal, or the dissolution of your marriage to the principal.

If you have special skills or expertise, you must use those special skills and expertise when acting for the principal. You must disclose your identity as an agent whenever you act for the principal by writing or printing the name of the principal and signing your own name "as Agent" in 'ne following manner:

"(Principal's Name) by (Your Name) as Agent"

The meaning of the powers granted to you is contained in Section 3-4 of the Illinois Power of Attorney Act, which is incorporated by reference into the body of the power of attorney for property document.

If you violate your duties as agent or act outside the authority granted to you, you may be liable for any damages, including attorney's fees and costs, caused by your violation.

If there is anything about this document or your duties that you do not understand, you should seek legal advice from an attorney."

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#### NOTICE TO THE INDIVIDUAL SIGNING THE ILLINOIS

STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY.

PLEASE READ THIS NOTICE CAREFULLY. The form that you will be signing is a legal document. It is governed by the Illinois Power of Attorney Act. If there is anything about this form that you do not understand, you should ask a lawyer to explain it to you.

The purpose of this Power of Attorney is to give your designated "agent" broad powers to handle your financial affairs, which may include the power to pledge, sell, or dispose of any of your real or personal property, even without your consent or any advance notice to you. When using the Statuter' Short Form, you may name successor agents, but you may not name co-agents.

This form does not impose a duty upon your agent to handle your financial affairs, so it is important that you select an agent who will agree to do this for you. It is also important to select an agent whom you trust, since you are giving that agent control over your financial assets and property. Any agent who coes act for you has a duty to act in good faith for your benefit and to use due care, compatence, and diligence. He or she must also act in accordance with the law and with the directions in this form. Your agent must keep a record of all receipts, disbursements, and significant actions taken as your agent.

Unless you specifically limit the period of time that this Foreer of Attorney will be in effect, your agent may exercise the powers given to him or her throughout your lifetime, both before and after you become incapacitated. A court, however, can take away the powers of your agent if it finds that the agent is not acting properly. You may also revoke this Power of Attorney if you wish.

This Power of Attorney does not authorize your agent to appear in court for you as an attorney-at-law or otherwise to engage in the practice of law unless he or she is a licensed attorney who is authorized to practice law in Illinois.

The powers you give your agent are explained more fully in Section 3-4 of the Illinois Power of Attorney Act. This form is a part of that law. The "NOTE" paragraphs throughout this form are instructions.

You are not required to sign this Power of Attorney, but it will not take effect without your signature. You should not sign this Power of Attorney if you do not understand everything in it, and what your agent will be able to do if you do sign it.

Please place your initials on the following line indicating that you have read this Notice:

Yuliya Recesfelskaya (Y. B.)

Principal's initials

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#### ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

and address of principal heraby make all and a principal heraby make all a principal heraby make a principal heraby
and address of principal) hereby reveke all prior powers of attorney for property executed by me and
appoint:
(insert in the and address of agent)
(NOTE: You may ∌ot name co-agents using this form.)
as my attorney-in-fac. (n)y "agent") to act for me and in my name (in any way! could act in person) with
respect to the following rowers as defined in Section 3.4 rather following rowers as defined in Section 3.4 rather following rowers
respect to the following rowers, as defined in Section 3-4 of the "Statutory Short Form Power of Attorney for
Property Law" (including at an endments), but subject to any limitations on or additions to the specified powers inserted in paragraph 2 or 3 below:
in paragraps, 2 or 5 below.
(NOTE: You must strike out any actions and the survey of t
(NOTE: You must strike out any or a or more of the following categories of powers you do not want your
The state of the s
be granted to the agent. To strike out a cat's gory you must draw a line through the title of that category.)
(a) Real estate transactions.
(b) Financial institution transactions.
(c) Steek and bend transactions.
(d) Crowning Service (Service)
(d) Tangible personal property transactions.
(e) Safe deposit box transactions.
— (f) insurance and annuity transactions.
(9) Retirement plan transactions:
(h) Social Security, employment and military service benefits.
(i) Tax matters.
(i) Claims and litigation.
(k) Commodity and option transactions.
(I) Business operations.
(m) Borrowing transactions.
(n) Estate transactions.
(o) All other property transactions.
(NOTE: Limitalian and a time
(NOTE: Limitations on and additions to the agent's powers may be included in this power of attorney if they
are specifically described below.)
2. The person appelled above at all and a second at the se
2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars:
Tenering politicals.
(NOTE: Here you may include any specific limitations you deem appropriate, such as a prohibition or
conditions on the sale of particular stock or real estate or special rules on borrowing by the agent.)
The state of the s
112 V Matheward
412 property and selection
Chief Ve Safe of 111
2 in Addition to the second of
3. In addition to the powers granted above, I grant my agent the following powers:
11VV 1 CICIE VOU MAY AND ANY OMER ADIOACHIA AAMARS including without III-11-11-11-11-11-11-11-11-11-11-11-11-
and the state of appointment, Hallie of Change beneficianed or joint tenants or much as a mond and any time.

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(NOTE: Your agent will have authority to employ other persons as necessary to enable the agent to properly exercise the powers granted in this form, but your agent will have to make all discretionary decisions. If you want to give your agent the right to delegate discretionary decision-making powers to others, you should keep paragraph 4, otherwise it should be struck out.)

4. My agent rice lave the right by written instrument to delegate any or all of the foregoing powers involving discretioner, y decision-making to any person or persons whom my agent may select, but such delegation may be at rended or revoked by any agent (including any successor) named by me who is acting under this power of attories at the time of reference.

(NOTE: Your agent will be entitled to reimbursement for all reasonable expenses incurred in acting under this power of attorney. Strike out a earaph 5 if you do not want your agent to also be entitled to reasonable compensation for services as agent.)

My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.

(NOTE: 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 preserved at the time this power is signed and will continue until your death, uness a limitation on the beginning date or duration is made by initialing and completing one or both of paragraphs o at d 7.)

6. () This power of attorney shall become effective on (NOTE: Insert a future date or event during your lifetime, such as a court de ermination of your disability or a written determination by your physician that you are incapacitated, when you want this power to first take effect.)

7. () This power of attorney shall terminate on (NOTE: Insert a future date or event, such as a court determination that you are not under a regal disability or a written determination by your physician that you are not incapacitated, if you want this power to terminate prior to your death.)

(NOTE: If you wish to name one or more successor agents, insert the name and address of each successor agent in paragraph 8.)

8. If any agent named by me shall die, become incompetent, resign or refuse to accept the office of agent, name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

purposes of paragraph 8, a person shall be considered to be incompetent if and while the person is a minor or an 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.

(NOTE: If you wish to, you may name your agent as guardian of your estate if a court decides that one should be appointed. To do this, retain paragraph 9, and the court will appoint your agent if the court finds that this appointment will serve your best interests and welfare. Strike out paragraph 9 if you do not want your agent to act as guardian.)

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9. If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under the
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.

· · · · · · · · · · · · · · · · · · ·	
(NOTE: This form does not authorize your agent to appear in court for you a otherwise to engage in the practice of law unless he or she is a licensed atterpractice law in Illingia.)	as an attorney-at-law or orney who is authorized to
11. The Notice to Agant is incorporated by reference and included as par	t of this form.
Dated: 01.11.12	••
Signed	idþ\$f`tine witness ahð ydul 🔍 📉
signature is notarized, using the form below. The natary may not also sign a	ay a williess.)
The undersigned witness certifies that	ent as the free and voluntary act ther to be of sound mind and the attending physician or mental er, operator, or relative of an or resident; (c) a parent, sibling, the principal or any agent or ions hip is by blood, marriage, or attorney  Witness
(Second witness) The undersigned witness certifies that	ower of attorney, appeared perore trument as the free and voluntary m or her to be of sound mind and the attending physician or mental ner, operator, or relative of an or resident; (c) a parent, sibling, the principal or any agent or tionship is by blood, marriage, or
Dated:	
	Witness

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AG' NT'S CERTIFICATION AND A	CCEPTANCE OF AUTHORITY
SERGE: Savilar	
I, (insert name of agent), certify that t	he attached is a true copy of a power of
attorney naming the ur dersigned as agent or su	
principal).	Julya Berestet swarl
I certify that to the best of my knowledge the power of attorney, is alive, and has not revoked agent have not been altered or terminated: and	the power of attorney; that my powers as
force and effect.	•
I accept appointment as agent under this po	ver of attorney.
This certification and acceptance is made un	der peraity of perjury.*
Dated: 10//11/1/2	Official Seal Paul B Clifford Notary Public State of Illinois W. Cummission Expires 08/18/2012
(Agent's Signature)  SERBEI SANILOV	
(Print Agent's Name) 412 MW. Malith St2	App3B DAKPARKE ISL

\*(NOTE: Perjury is defined in Section 32-2 of the Criminal Code of 1961, and is a

(Agent's Address)

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State of TL  County of COOK) SS.	
The uddersigned, a notary public in and for the above county and star in the foregoing power of attorney, appeared before me and the witness (and Salam Adultum) in person and acknowledged is as the free and voluntary act of the principal, for the uses and purposes	is singular to the instrument
the correctness of the signature(s) of the agent(s)).	<b>************</b>
Dated:	Official Seal Paul B Clifford Notary Public States & Whiteis
My commission expires 3/18/12	My Commission Expires 08/18/2012
(NOTE: You may, but are no required to, request your agent and successignatures below. If you incluy a specimen signatures in this power of a certification opposite the signatures of the agents.)	sessor agents to provide specimen August Complete the
Specimen signatures of agent (and successors)	I certify that the signatures of my agent (and successors)
Jain C	are genuine.  Belest (principal)
(abent) Juliu	Bellestels (principal)
(success) (spent)	Belestel
(successor agent)	(principal)
(NOTE: The name, address, and phone number of the person prepart principal in completing this form should be inserted below.)	
Name: SERFE   SANIBOV Address: 412 N. MARLOW SA2 A ORK PARK I L, 60302	pt 38
	TÓ
Phone 708-660-9734	T'S OFFICE
	C

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File No.: 173814

#### **EXHIBIT A**

#### PARCEL1:

UNIT NO. 3-B AS DELINEATED ON SURVEY OF THE FOLLOWING DESCRIBED PARCEL OF REAL ESTATE (HEREINAFTER REFERRED TO AS THE "PARCEL"): THE NORTH 21 FEET OF LOT 10 AND THE SOUTH34 FEET OF LOT 11 IN E.O. GALES'S SUBDIVISION OF BLOCK 4 IN KETTLESTRING'S ADDITION TO HARLEM, A SUBDIVISION OF THE NORTH PART OF THE NORTH WEST QUARTER OF SECTION 7, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILLINOIS, WHICH SURVEY IS ATTACHED AS EXHIBIT A TO THE DECLARATION OF CONDOMINIUM MADE BY VICTOR LUKAS AND DOROTHY LUKAS, HIS WIFE RECORDED IN THE OFFICE OF RECORDER OF COOK COUNTY, ILLINOIS AS DOCUMENT NO. 20134926, TOGETHER WITH AN UNDIVIDED 11.299% INTEREST IN SAID PARCEL (EXCEPT FROM SAID PARCEL THE PROPERTY AND SPACE COMPRISING ALL THE UNITS THEREOF AS DEFINED AND SET FORTH IN SAID DECLARATION AND SURVEY).

#### PARCEL2:

EASEMENT FOR A COMMON DRIVEWAY OVER AND ACROSS THE NORTH 5 FEET OF THE SOUTH 45 FEET OF THE NORTH 66 FEET OF LOT 10 IN THE E.O. GALES SUBDIVISION OF BLOCK 4 IN KETTLESTRING'S ADDITION TO HAPLEM, A SUBDIVISION OF THE NORTH PART OF THE NORTH WEST QUARTER OF SECTION 7, TOWNSHIP 39 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN IN COOK COUNTY, ILL INOIS, AS CREATED BY THE AGREEMENT BETWEEN PROCTOR J. GILBERT AND JANE GILBERT, HIS WIFE, AND VICTOR LUKAS AND DOROTHY LUKAS, HIS WIFE, DATED JUNE 17, 1966 AND RECORDED OCTOBER 20,1966, AS DOCUMENT NO Ollny Clark's Orrica 19974246, IN COOK COUNTY, ILLINOIS.

Pin: 16-07-102-035-1008

Address: 412 N Marion St Apt 3B Oak Park IL 60302