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This Document Prepared By:

Doc#: 1206931036 Fee: \$50.00 Eugene "Gene" Moore RHSP Fee:\$10.00 Cook County Recorder of Deeds Date: 03/09/2012 12:21 PM Pg: 1 of 7

ILLINOIS STATUTORY SHORT FORM

OWER OF ATTORNEY FOR PROPERTY

(NOTICE: THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON YOU DESIGNATE [YOUR "AGEN!"] BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN POWERS ARE EXERCISED, YOUR AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND IN ACCORDANCE WITH THIS FORM AND KEEP A RECORD OF RECEIPTS, DISBURSEMENTS AND SIGNIFICANT ACTIONS TAKEN AS AGENT. A COURT CAN TAKE AWAY THE POWERS OF YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGEN'TS UNDER THIS FORM BUT NOT CO-AGENTS. UNLESS YOU EXPRESSLY LIMIT THE FURATION OF THIS POWER IN THE MANNER PROVIDED BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR BEHALF TERMINATES IT, YOUR AGENT MAY EXERCISE THE POWERS GIVEN HERE THROUGHOUT YOUR LIFETIML EVEN AFTER YOU BECOME DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART [SEE THE BACK OF THIS FORM]. THAT LAW EXPRESSLY PERMITS THE USE OF ANY DIFFERENT FORM OF POWER OF ATTORNEY YOU MAY DESIRE. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.)

POWER OF ATTORNEY made this 1st day of Dec., 2011.

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1.	I. Tor	15 P-	Choi .	of /	795	Pondside	Drhe,	Northbrook	a n 6006.
in the c	eity of	MARIA	Nbrook	. coun	tv of	Cook	, and sta	te of Zu	, hereby
appoint	t: Jir	Your	ng Chei	aka	<u>Jin, Y.</u>	Choi, as my atto	orney-in-fa	ict (my "agent"	') to act for
me and in my name (in any way I could act in person) with respect to the following powers, as									
defined in Section 3-4 of the "Statutory Short Form Power of Attorney for Property Law"									
(includ	ing all	amendr	nents), t	out subje	ct to an	y limitations or	n or additio	ons to the speci	fied powers
			2 or 3 b						

(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATEGORIES OF POWERS YOU DO NOT WANT YOUR AGENT TO HAVE. FAILURE TO STRIKE THE TITLE OF ANY CATEGORY WILL CAUSE THE POWERS DESCRIBED IN THAT CATEGORY TO PE GRANTED TO THE AGENT. TO STRIKE OUT A CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)

- Real estate transactions. (a)
- **(b)** Financial institution transactions.
- Stock and bond transactions.
- Tangible personal property transactions. (d)
- Safe deposit box transactions. (e)
- Insurance and annuity transactions. (f)
- Retirement plan transactions. (g)
- Social Security, employment and military service benefits. (h)
- Tax matters. (i)
- Claims and litigation. (j)
- Commodity and option transactions. (k)
- Business operations. (1)
- Borrowing transactions. (m)
- Estate transactions. (n)
- All other property powers and transactions. (0)

JUNE CLORAS (LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWER OF ATTORNEY IF THEY ARE SPECIFICALLY DESCRIPED BELOW.)

The powers granted above shall not include the following powers or shall be modified or 2. limited in the following particulars (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):

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3.	In addition to the powers granted above, I grant my agent the following powers (here you
may ad	ld any other delegable powers including, without limitation, power to make gifts, exercise
powers	s of appointment, name or change beneficiaries or joint tenants or revoke or amend any
trust st	pecifically referred to below):

THE POWER TO GUARANTY ANY AND ALL LOANS AND TO SIGN ALL LOAN GUARANTY DOCUMENTS

(YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PERSONS AS NECESSARY TO ENABLE THAT AGENTTO PROPERLY EXERCISE THE POWERS GRANTED IN THIS FORM, BUT YOUR AGENT WILL HAVE TO MAKE ALL DISCRETIONARY DECISIONS. IT YOU WANT TO GIVE YOUR AGENT THE RIGHT TO DELEGATE DISCRETIONARY DECISION-MAKING POWERS TO OTHERS, YOU SHOULD KEEP THE NEXT SENTENCE, OTHERWISE IT SHOULD BE STRUCK OUT.)

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

(YOUR AGENT WILL BE ENTITLE TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTURNEY. STRIKE OUT THE NEXT SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

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

(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 POWER OF ATTORNEY WILL BECOME EFFECTIVE AT THE TIME THIS POWER IS SIGNED AND WILL CONTINUE UNTIL YOUR DEATH UNLESS A LIMITATION ON THE BEGINNING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:)

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6.	() This power of attorney shall become effective on
	t a future date or event during your lifetime, such as court determination of your disability, you want this power to first take effect)
7.	(\checkmark) This power of attorney shall terminate on 6/1/2012
	t a future date or event, such as court determination of your disability, when you want this to terminate prior to your death)
	OU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND RESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)
8.	If any agent named by me shall die, become legally disabled, resign or refuse to act, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent: arposes of this paragraph 8, a personal shall be considered to be incompetent if and while
the pe	arposes of this paragraph 8, a personal shall be considered to be incompetent if and while arson is a minor or an adjudicated incompetent or disabled person or the person is unable to brompt and intelligent consideration to business matters, as certified by a licensed physician.

(IF YOU WISH TO NAME A GUARDIAN OF YOUR PERSON OR A GUARDIAN OF YOUR ESTATE, OR BOTH, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY RETAINING THE FOLLOWING PARAGRAPH. THE COURT WILL APPOINT YOUR AGENT IF THE COURT FINDS THAT SUCH 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 king property) is to be appointed, I nominate the agent
- 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.

Signed (Principal)

(YOU MAY, BUT ARE NOT REQUIRED TO, REQUEST YOUR AGENT AND SUCCESSOR AGENTS TO PROVIDE SPECIMEN SIGNATURES BELOW. IF YOU INCLUDE SPECIMEN SIGNATURES IN THIS POWER OF ATTORNEY, YOU MUST COMPLETE THE CERTIFICATION OPPOSITE THE SIGNATURES OF THE AGENTS.

Specimen signatures of agent (and successors)

I certify that the signatures of my agent (and successors) are correct.

(Agent)

(Principal)

(Successor Agent)

(Principal)

(Successor Agent)

(Principal)

(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW.)

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STATE OF)		
COUNTY OF) SS.		
known to me to be the same per power of attorney, appeared be signing and delivering the instr	erson whose name efore me and the ac rument as. the free	bove county and state, certifies is subscribed as principal to the dditional witness in person and and voluntary act of the principle correctness of the signature.	le foregoing l acknowledged ipal, for the uses
Dated:		1	
(SEAL) QIN, MINING SE SUSAIN S KI NOTARY PUBLIC STATE MY COMMISSION EXP	M E OF ILLINOIS	Notary Pub My Commission Expires_	olic 11/2/15
appeared before me and the no	ne is subscribed as partiary public and actual and actual	principal to the foregoing powknowledged signing and delivering pal, for the uses and purpoind metacry.	ering the
Dated:			<u> </u>
(THE NAME AND ADDRES INSERTED IF THE AGENT ESTATE.)	S OF THE PERSO WILL HAVE POV	Witness ON PREPARING THIS FORM WER TO CONVEY ANY IN 1	I SHOULD BE EREST IN REAL
This document was prepared b	ov:		CO

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CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1412 008865822 LP1 STREET ADDRESS: 1795 PONDSIDE DRIVE

CITY: NORTHBROOK COUNTY: COOK

TAX NUMBER: 04-16-102-017-0000

LEGAL DESCRIPTION:

PC.
TOWN.
ILLIN

COOK COUNTY CLERK'S OFFICE LOT 1 IN BIRCH POND, A SUBDIVISION OF PART OF THE WEST 1/2 OF THE NORTHWEST 1/4 OF SECTION 16, TOWNSHIP 42 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

LEGALD MW7