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Doc#: 1301415013 Fee: \$88.00 Karen A. Yarbrough RHSP Fee: \$10.00 Cook County Recorder of Deeds Date: 01/14/2013 08:52 AM Pg: 1 of 9

ILLINOIS STATUTORY

SHORT FORM

POWER OF ATTORNEY FOR PROPERTY

Prepared by: JAMES J. KRITEK, ATTORNEY AT LAW

Mail to: JAMES J, KRITEK
3630 PALM CANYON OR,
NORTHBROOK, IL 60062

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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 மீர்ம் ஸ்க்ஸ்ல் மக்கில் மக்கில்

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 Statutory 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 does act for you has a duty to act in good faith for your benefit and to use due care, competence, 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 Power 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.

(Liver Din

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

Principal's initials

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, RAJESH RAJU (insert nam	е
s win air at hereby royake all prior powers of attorney for property executed by me and	
appoint: JAMES J. KRITEK, 3630 PALM CANYON, DR., NOKTHROUGK, JL.	
(insert name and address of agent)	
(NOTE: You may not name co-agents using this form.)	
as my attorney-in-fact (my "agent") to act for in earlier 2.4 of the "Statutory Short Form Power of Attorney	v for
as my attorney-in-fact (my "agent") to act for the and fit my fiame (in all) ways as the respect to the following powers, as defined in Section 3-4 of the "Statutory Short Form Power of Attorne Property Lav." (including all amendments), but subject to any limitations on or additions to the specified	•
Property Lav. (Including all amendments), but subject to any limitations on or additional of the property Lav.	
powers inserted in paragraph 2 or 3 below:	
(NOTE: You must strike out any one or more of the following categories of powers you do not want you	r
The first the state of any category will course the bowlets accompany in the state of the bowlets accompany in the state of the bowlets are stated as the state of the bowlets are stated as the state of the bowlets are stated as the bowlets are stated a	
be granted to the agent. To strike out a category you must draw a line through the title of that category.	}
be granited to the ago.	
(a) Real estate transactions.	
(b) Financial institution trans let and	
(c) Stock and bond transaction C:	
(d) Tangible personal property trar eactions.	
(e) Safe-deposit box transactions.	
(f) Incurance and annuity transactions.	
(g) Retirement plan transactions.	
(h) Secial Security, employment and military control.	
(i) Tax matters. (j) Claims and litigation.	
(i) Claims and litigation. (k) Commodity and option transactions. (l) Rusiness operations. (m) Dorrowing transactions. (n) Estate transactions.	
(I) Business operations.	
(m) Dorrowing transactions .	
(n) Estate transactions.	
(o) All other property transactions .	
(NOTE: Limitations on and additions to the agent's powers may be included in this power of attorney if	tney
(NOTE: Limitations on and additions to the agent's powers may be more and additions to the agent's powers may be more and additions to the agent's powers may be more agent's powers may be agent's powers may be agent's powers may be agent's power agent	
are specifically described below.)	
2. The powers granted above shall not include the following powers or shall be modified or limited in	1 the
(NOTE: Here you may include any specific limitations you doesn't appropriate for conditions on the sale of particular stock or real estate or special rules on borrowing by the agent.)	
this power of attorney is limited only for the sale of property at 407 Kelling Lane, Glencoe, IL	
3. In addition to the powers granted above, I grant my agent the following powers:	
	ns,
(NOTE: Here you may add any other delegable powers including, without mattern powers of exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend are	y trus
specifically referred to below.)	
N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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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 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.

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

5. 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 power of attorney will become effective at the time this power is signed and will continue tratil your death, unless a limitation on the beginning date or duration is made by initialing and completing one or both of paragraphs 6 and 7.)

·		
6 () This nower of at	torney shall become effective on	
Nov- 1st -20/	12	determination of your disability or a
		h as a court determination of your disability or a tated, when you want this power to first take
written determination by	your physician that you are incapaci	tated, when you want this power to first take
effect.)		
enou.,	9	A council as of the class of business on the day the sale
7 () This power of a	torney shall terminate on earlier of dec	- 31 - 2012 (or) as of the close of business on the day the sale
of 407 Kelling Lane, Gle	ncoe, IL is complete.	the same and under a legal disability
		ination that you are not under a legal disability incapacitated, if you want this power to
or a written determinati	on by your physician that you are not	incapacitated, if you want this power to
terminate prior to your	death.)	'0 .
tomana pire		send the name and address of each successor
(NOTE: If you wish to r	name one or more successor agents,	insert the name and address of each successor
agent in paragraph 8.)		
-g , g .		ent, resign or refuse to a cert the office of agent, the order named) as successc(s) to such
8. If any agent name	ed by me shall die, become incompete	the order named) as successor(s) to such
I name the following (e	ach to act alone and successively, in	the order named) as successor(s) to such
agent:	N/A	
***************************************	-tII be considered to h	e incompetent if and while the person is a minor
purposes of paragraph	8, a person shall be considered to b	rson is unable to give prompt and intelligent
or an adjudicated inco	mpetent or disabled person of the pe	I physician.
consideration to busin	ess matters, as certified by a licensed	, pri) o louis
	nama yaur agent as guardi	an of your estate if a court decides that one e court will appoint your agent if the court finds
(NOTE: If you wish to,	you may name your agent as guard.	e court will appoint your agent if the court finds fare. Strike out paragraph 9 if you do not want
should be appointed.	10 go mis, retail paragraph 3, and the	fare. Strike out paragraph 9 if you do not want

that this appointment will serve your best interests and welfare. Strike out paragraph 9 if you do not want

Dorn Kryn

your agent to act as guardian.)

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- 9. He guardian of my estate (my property) is to be appointed, I nominate the agent acting under this power of attorney as such quardian, to serve without hand 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 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.)

11. The Notice to Agent is incorporated by reference and included as part of this form.

Dated November	20/2
6	SH RAJU
SignedK^:JE	SH RAJU
	(crincipal)
	-/- <u>/</u> /

(NOTE: This power of attorney will not be effective unless it is signed by at least one witness and your signature is notarized, using the form below. The notary may not also sign as a witness.)

The undersigned witness certifies that RAJESH RAJU , known to me to be the same person whose name is 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 there is set forth. I believe him or her to be of sound mind and memory. The undersigned witness also certifies that the witness is not: (a) the attending physician or mental health service provider or a relative of the physician or provider; (b) an owner, operator, or relative of an owner or operator of a health care facility in which the principal is a patient or resident; (c) a parent, sibling, descendant, or any spouse of such parent, sibling, or descendant of either the principal or any agent or successor agent under the foregoing power of attorney, whether such relationship is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney.

Dated Novamber 2, 20/2

Willess SAT-SH-

(NOTE: Illinois requires only one witness, but other jurisdictions may require more than one witness. If you wish to have a second witness, have him or her certify and sign here:)

(Second witness) The undersigned witness certifies that the same person whose name is 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 him at her to be of sound mind and memory. The undersigned witness also certifies that the witness is not. (a) the attending physician or mental health service provider or a relative of the physician or provider; (b) an owner, operator, or relative of an owner or operator of a health care facility in which the principal is a patient or resident; (c) a parent, sibling, descendant, or any spouse of such parent, sibling, or descendant of either the principal or any agent or successor agent under the foregoing power of attorney, whether such relationship is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney.

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		Page No	gh let	(NO)	4
	State of $\mathbb{Z} n. \mathbb{D}. \mathbb{Z} H)$ SS.				leks c
WARA	County of	bublic in and for the above count own to me to be the same perso	y and state, certifi	es that	A :
	the foregoing power of attorney	y, appeared before me and the	witness(es)NAM	IE OF WITNESS	…そのため
	as the free and voluntary act of the correctness of the signature	f the principal, for the uses and e(s) of the agent(s)).	purposes therein	set forth (, and certified	904
	Dated: _ 2 XOV 2012	N.N.	ARAVANA SV DVOCATE &	VAMY, DA, LLB.	THE STATE OF
	My Expire My commission expires	es on : 10-12-2016 Govi	No. 17, Srigano ndappa Layout	Near Aruna Bar A	. W
	(NOTE: Vou may, but are not	R.N equired to, request your agent.	vi.v. II Stage, N aibias Mocket Medical	agashettihalli So	H.
	signatures below. If you include certification opposite the signal	<i>le</i> specimen signatures in this p	ower of attorney, y	you must complete the	
c	Specimen signatures of agent (and successors)	warnified by	of my	y that the signatures agent (and successors)	ì
	MANUEL LANGUER	ADALL YAR		Ky eth Kom	4.00
	JAMES JAKRITAK (agent)	KARAR AMADIO		1111 N m 1 m	H RAFU
	(successor agent)	Mayo Hall, M.G. Road, 35.09 Mobile: 964510: Email: kararahmedadvoca	7.75	(principal) OAX	100 R POST
		Citizent recommendation		(1 1 -8)	
	(successor agent)		C_{r}	(principal) - Ko	the Abore
	(NOTE: The name, address, a principal in completing	and phone number of the persor g this form should be inserted b	n preparing this fo elow.)	rm or who assisted the	A D ANGABORE SLOOGE
		TEK, ATTORNEY AT LAW		0.0	
	Address: 3630 PALM	CANYON DRIVE		1/5:	
	NORTHBROOK, IL 600	062		Office	
-	.,				
	Phone: 847-205-9205.				

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EXHIBIT A

LEGAL DESCRIPTION

LOT 2 IN ODH'S SUBDIVISION OF PART OF THE NORTH 15 ACRES OF THE EAST 1/2 OF THE SOUTHEAST 1/4 OF SECTION 1, TOWNSHIP 42 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN ACCORDING TO A PLAT OF SAID SUBDIVISION RECORDED OCTOBER 31, 1939 IN BOOK 331 OF PLATS, PAGE 9, AS DO. U. IENT NUMBER 12390488 IN COOK COUNTY, ILLINOIS.

Permanent Index Number(s): 64-01-402-009

For informational purposes only, the subject parcel is commonly known as:

407 Keiling Lane, Glenroe, IL 60022

TITLE RESOURCES GUARANTY COMPANY

Burnet Title 9450 Bryn Mawr Avenue, Suite 700 Rosemont, IL 60018

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AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY

JAMES J. KRITER (insert name of agent), certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for figure insert name of principal).

I certify that to the best of my knowledge the principal had the capacity to execute the power of actorrey, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.

I accept appointment es agent under this power of attorney.

This certification and acceptance is made under penalty of perjury.*

Dated: ///2//2

(Agent's Signature)

JAMES J. KRITEK

(Print Agent's Name)

NORTHBROOK II 6,0062

(Agent's Address)

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

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AFFIDAVIT TO ESTABLISH RELIANCE UPON POWER OF ATTORNEY PURSUANT TO 755 ILCS 45/2-8

JAMES J. KRITEK , being the named agent in that
certain Fower of Attorney dated 1/2/12, made by RATESH RATU (principal), cose hereby state as follows:
1. The instrument attached hereto is a true copy of the Power of Attorney;
2. To the best of my knowledge the named principal is alive and the relevant powers given me therein have not been altered or terminated.
James Jules (Named agent)
Signed and sworn to before me this 30 day of New Mour, 2012
Notary Public Man on Blanany
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