

Doc#: 1309922074 Fee: \$52.00 RHSP Fee: \$10.00 Affidavit Fee:

Karen A.Yarbrough

Cook County Recorder of Deeds
Date: 04/09/2013 01:39 PM Pg: 1 of 8

Above Space for Recorder's Use

Durable Power of Attorney For Property from Michael J. McDermott, Principal to Mark E. McDermott, Agent Dated March 16, 2013

Legal Description:

Parcel 1: Unit Number 509 and P-257 and P-185 in the Edge Lofts and Tower Condominium as delineated on a survey of the following described real estate: Lots 5, 6, 7, 8 and 9 in Block 22 in School Section Addition to Chicago in Section 16, Township 39 North, Range 14 East of the Third Principal Meridian; which survey is attached as Exhibit "A" to the Declaration of the Condominium recorded as Document Number 0430327071 together with its undivided percentage interest in the common elements, all in Cook County, Illinois.

Parcel 2: Easements for the benefit of Parcel 1 ingress, egress, use and enjoyment as created by and set forth in the Declaration of Covenants, Conditions, Restrictions and Easements for the Edge Lofts and Tower, recorded as Document Number 0430327070.

Permanent Index Numbers: 17-16-109-027-1045

17-16-109-027-1332 17-16-109-027-1404

Commonly known as 210 S. Des Plaines Street, Unit 509, Chicago, Illinois 60661

After recording, mail to: Regency Title Services, Inc., 290 S. County Farm Road, Suite M, Wheaton, Illinois 60187

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, MICHAEL J. MC DERMOTT of 17206 Teakwood Drive, Tinley Park, Illinois 60487 hereby revoke all prior powers of attorney for property executed by me and appoint My Son, MARK E. MC DERMOTT of 17206 Teakwood Drive, Tinley Park, Illinois 60487 (NOTE: You may not name co-agents using this form.) as my attorney-in-fact (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" (including all amendments), but subject to any limitations on or additions to the specified 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 your agent to have. Failure to strike the title of any category will cause the powers described in the category to be granted to the agent. To strike out a category you must draw a line through the atle of that category.)

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

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

(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.)

This Power of Attorney is limited to the execution of any and all documents including, but not limited to all mortgage documents related to the following property:

Parcel 1: Unit Number 509 and P-257 and P-185 in the Edge Lofts and Tower Condominium as delineated on a survey of the following described real estate: Lots 5, 6, 7, and 9 in Block 22 in School Section Addition to Chicago in Section 16, Township 39 North, Range 14 East of the Third Principal Meridian; which survey is attached as Exhibit "A" to the Declaration of the Condominium recorded as Document Number 0430327071 together with its undivided percentage interest in the common elements, all in Cook County, Illinois.

Parcel 2: Easements for the benefit of Parcel 1 ingress, egress, use and enjoyment as created by and set forth in the Declaration of Covenants, Conditions, Restrictions and Easements for the Edge Lofts and Tower, recorded as Document Number 0430327070.

Commonly known as: 210 South Des Plaines, Unit 509, Chicago, Illinois 60661 P.I.N.: 17-16-109-027-1045 17-16-109-027-1332 and 17-16-109-027-1404

3. In addition to the powers granted above, I grant my agent the following powers:

(NOTE: Here you may add any other delegable powers including, without limitation, power to make gifts, exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below.)		
	<u> </u>	

(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 agent 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 services 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 until 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 power of attorney shall become effective upon execution by the Principal.

(NOTE: Insert a future date or event during your lifetime when you want this Power to first take effect, such as a court determination of your disability or a written determination by your physician t'(x) you are incapacitated.)

7. This power of attorney shall terminate upon the completion of the closing of the purchase of 210 South Des Flaires, Unit 509, Chicago, Illinois.

(NOTE: Insert a future acts or event if you want this Power to terminate prior to your death such as a court determination in a you are not under a legal disability or a written determination by your physician that you are not incapacitated.)

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

8.		die, become incompetent, resign or refuse to
accept the of	ffice of agent, I name the followin	g (each to act a'one and successively, in the order
named) as si	accessor(s) to such agent:	04.
		7/4/
		0,

For purposes of this 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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UNOFFICIAL COPY

- 9. If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under this 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 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 Notice to Agent is incorporated by reference and included as part of this
form.	104
Date:	3/16/13
	x Mula () 1 ml heurett
	MICHAEL J/MC DERMOTT

(NOTE: This power of attorne) 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 MICItAFL J. MC DERMOTT is 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 therein set forth. I believe him or her to be of sound mind and memory. The radersigned witness also certifies that the witness is not: (a) the attending physician or mental nealth 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:	3-16-13	- Daba Vanda Nea	
		Witness /	
	Address:	17405 Tamar Lane	
		Tinley Park, IL 60487	
		l '	

-6-

(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 MICHAEL J. MC DERMOTT is 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 therein 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 egent under the foregoing power of attorney, whether such relationship is by blood, marriage, or adortion; or (d) an agent or successor agent under the foregoing power of attorney.

Dated: 3-16	-13	
		Winthis R Marovich
		Witness
Ado	dress:	7761 Poliet Jr.S.
		July Park Il 60477
AIOTE, This Boss	A44	
by at least one (1) witness	_	rney will not be effective unions it is notarized and signed e form above.)
STATE OF ILLINOIS) SS	
COUNTY OF COOK)	
The sundamatemed		while in and for the above county and state, contified that

The undersigned, a notary public in and for the above county and state, certifies that MICHAEL J. MC DERMOTT is 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 witness (es) 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.

Dated: March 16	2013	
Notary Public: My commission expires:	_ Jun	J Connell
	-7-	OFFICIAL SEAL JOHN J O'DONNELL NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:09/17/13

(NOTE: 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

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

MARK E MC DÉRMOTT

IICHAEL J. MC DERMOTT

THIS INSTRUMENT PREPARED BY:

John O'Donnell

Hiskes, Dillner, O'Donnell, Marovich & Lapp, Ltd.

10759 W. 159th Street, Suite 201

Orland Park, IL 60467

708-403-5050

(NOTE: This Notice To Agent shall be supplied to an agent appointed under a Power of Attorney for Property.)

NOTICE TO AGENT

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 verminated 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 preserve 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 person who has authority to make health care decisions for the principal to carry out the principal's reasonable expectations to the extent actually in the principal's best interest. As agent you must not do any of the following:
 - a. act so as to create a conflict of interest that is inconsistent with the other principles in this Notice to Agent;
 - b. do any act beyond the authority granted in this power of attorney;
 - c. commingle the principal's funds with your funds;
 - d. borrow funds or other property from the principal, unless otherwise authorized;
 - e. continue acting on be half of the principal if you learn of any event that terminates this power of attorney or your outhority 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 ar agent whenever you act for the principal by writing or printing the name of the principal and sening your own name "as Agent" in the 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."