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REQUESTED BY
Kensington Vanguard
39 W 37th Street, 7th Floor
New York, NY 10018

MAIL TO:
Kensington Vanguard
39 W 37th Street, 7th Floor
New York, NY 10018

LIMITED POWER OF ATTORNEY

642.981

NOTICE: This is an important document. It gives the person whom you designate (your "Agent" also called "Attorney in Fact") broad powers for a specific transaction, to handle your property during a certain period of time, which may include powers to mortgage your real property with advance notice to you by web based closing. These powers will continue to exist even after you have become disabled or incompetent, but the powers cease to exist at the conclusion of the transaction for which this power is granted. This document does not authorize anyone to make medical or other health care decisions. You may execute a different document, a health care proxy to do this. If there is anything about this document that you do not understand, you should ask a licensed attorney in your state to explain it to you.

BE IT KNOWN, that Michael G. Cook ("Principal")

Whose address is: 1515 West Hollywood Avenue
Chicago, IL 60660

has made and appointed, and by these presents does make and appoint the following person(s), namely: **SUSAN BARRICELLI**; and if more than one person is named, then each of whom may act separately, whose addresses are 1515 West Hollywood Avenue, Chicago, IL 60660 my/our true and lawful Attorney in Fact (also called Agent) for them and in their name, place and stead, for the following **specific and limited purposes**:

(1) This Limited Power of Attorney is given for the specific and limited purpose of refinancing the existing loan or loans secured by a mortgage(s) or deed of trust(s) encumbering the real property located at **1515 WEST HOLLYWOOD AVENUE, CHICAGO, IL 60660**, more particularly described in Exhibit A attached hereto, with **HSBC BANK USA, N.A.** (Lender) with a new loan in the approximate amount of **THREE HUNDRED SIXTY THOUSAND AND 00/100 DOLLARS (\$360,000.00)**, to be secured with a mortgage or deed of trust encumbering said real property, and expected to close on or about _____ (hereinafter referred to as the "Refinance.")

(2) To mortgage, refinance, hypothecate, assign, transfer, and in any manner deal with the real estate to effectuate the above referenced refinancing (which may also be called "banking transactions" under state statute);

(3) To execute, acknowledge, deliver escrow instructions, and all Closing Documents including but not limited to: Notes, Deeds, Mortgages/Deeds of Trust, Subordinations, Security Instruments, Riders, Attachments and Addenda, including any documents necessary or requested as part of this transaction by Title Insurer, Lender or the other parties to the transaction, those documents needed by governmental and taxing authorities, Covenants, Agreements and Assignments of Agreements, Assignments of Mortgages, Assignments of

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Deeds of Trust, Lien Waivers, encumbrance or waiver of homestead and any marital rights necessary to obtain the financing, Settlement Statements, Truth In Lending Disclosures, Loan Applications, HUD 1 and other written instruments of whatever kind and nature, all upon such terms and conditions as said Attorney in Fact (also called Agent) shall approve.

Further giving and granting said Attorney in Fact (also called Agent), full power and authority to do and perform all and every act and thing whatsoever requisite, necessary or appropriate to be done in and about the specific and limited premises (setout herein) as fully to all intents and purposes as I might or could be done if personally present, hereby ratifying and confirming all that said Attorney in Fact (also called Agent) should lawfully do or cause to be done by virtue hereof.

This Power of Attorney shall become effective immediately, and shall not be affected by my subsequent disability, incapacity or lack of mental competence, except as may be provided otherwise by an applicable state statute. This Power of Attorney is not intended to revoke or terminate any previously executed General Durable Power of Attorney except to the limit that it would affect this specific transaction and this Power of Attorney is limited to the specific time and for the specific purposes described herein. I may revoke this Power of Attorney at any time by providing written notice to my Attorney in Fact (also called Agent), however such revocation shall not be effective as to third parties acting in reliance upon this Power of Attorney if recorded, unless and until the revocation is similarly recorded in the same county and state registry or other established records for the recording of Powers of Attorney. This Power of Attorney is limited to a specific refinance, and this Power of Attorney shall continue in full force and effect until recordation of the Mortgage/Deed of Trust and execution of any other documents necessary to complete this refinance transaction.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

I, Michael G. Cook, the principal, sign my name to this power of attorney this 28 day of MARCH, 2013 and, being first duly sworn, do declare to the undersigned authority that I sign and execute this instrument as my power of attorney and that I sign it willingly, that I execute it as my free and voluntary act for the purpose(s) expressed in the power of attorney and that I am eighteen years of age or older, of sound mind and under no constraint or undue influence.

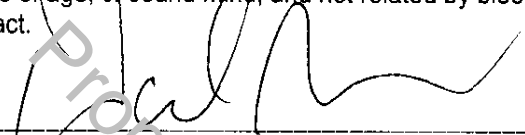
Michael G. Cook

Michael G. Cook, PRINCIPAL

Clara Marin
"OFFICIAL SEAL"
CLARA MARIN
Notary Public, State of Illinois
My Commission Expires 10/14/2013

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I, DANIEL SPOHN, the witness, sign my name to the foregoing power of attorney this 28 day of MARCH, 2013 and, being first duly sworn, do declare to the undersigned authority that the principal(s) signs and executes this instrument as his/her/their power of attorney and that he/she/they signs it willingly, and that I, in the presence and hearing of the principal(s), sign this power of attorney as witness to the principal's signing and that to the best of my knowledge the principal(s) is/are eighteen years of age or older, of sound mind and under no constraint or undue influence. I further declare that I am over eighteen years of age, of sound mind, and not related by blood or marriage to the Principal or the Attorney in Fact.


WITNESS

Printed Name of Witness: DANIEL SPOHN

State of: ILLINOIS

County of: COOK

BEFORE ME personally appeared MICHAEL G. COOK, who is/are personally known to me or who has produced _____ as identification (or proved to me on the basis of satisfactory evidence) to me known to be the individual(s) described in and who executed the within and foregoing Power of Attorney instrument and acknowledged before me that they executed the same as his/her/their free and voluntary act and deed, for the uses and purposes therein mentioned and desired the same be recorded as such.

WITNESS my hand and official seal in the county and state aforesaid this 28th day of March, 2013.

Clara Marin

Notary Public
My Commission Expires: 10-14-13



Address: 6109
Lyons Rd 60641

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AFFIDAVIT THAT POWER OF ATTORNEY IS IN FULL FORCE

STATE OF NY
COUNTY OF Kings

, ss

being duly sworn, deposes and says:

1. The Principal within did, in writing, appoint me as the Principal's free and lawful ATTORNEY(S)-IN-FACT in the within Power of Attorney.
2. I have no actual knowledge or actual notice of revocation or termination of the Power of Attorney by death or otherwise, or knowledge of any facts indicating the same. I further represent that the Principal is alive, has not revoked or repudiated the Power of Attorney and the Power of Attorney still is in full force and effect.
3. I make this affidavit for the purpose of inducing **Kensington Vanguard National Land Services, LLC** and **{{UNNAME}}** to accept delivery of the following Instrument (s), as executed by me in my capacity as the ATTORNEY(S)-IN-FACT, with full knowledge that this affidavit will be relied upon in accepting the execution and delivery of the Instrument (s) and in paying good and valuable consideration therefore:

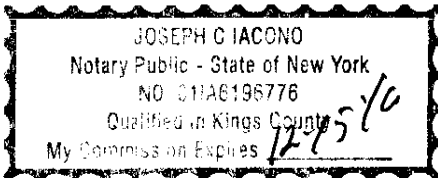
Susan Baricelli

UNIFORM FORM CERTIFICATE OF ACKNOWLEDGMENT (Within New York State)

State of New York)
County of Kings) ss.:

On the 29th day of March in the year 2013 before me, the under signed, personally appeared Susan Baricelli, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Joseph C. Iacono
Signature and Office of individual
taking acknowledgment



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ACKNOWLEDGMENT OF ATTORNEY-IN-FACT

I, SUSAN Barricelli, have read the attached power of attorney and am the person identified as the attorney-in-fact (the "Agent") for the principal. I hereby acknowledge that in the absence of a specific provision to the contrary in the power of attorney or in state law, when I act as Agent:

I accept the appointment as Agent.

I understand the duties under the Power of Attorney and under the law.

I shall exercise the powers for the benefit of the principal.

I shall keep the assets of the principal separate from my assets.

I shall exercise reasonable caution and prudence.

I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the principal

Susan Barricelli
Signature of Agent/Attorney-in-Fact

SUSAN BARRICELLI
Printed name of Agent/Attorney-in-Fact

Date

State of: New York

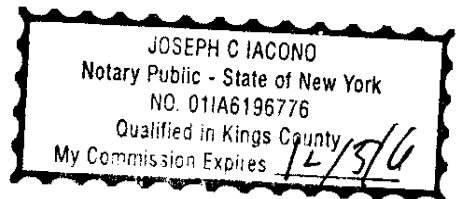
County of: Kings

BEFORE ME personally appeared Susan Barricelli, who is/are personally known to me or who has produced Driver License as identification (or proved to me on the basis of satisfactory evidence) to be the person described in and who executed the foregoing Power of Attorney instrument and acknowledged before me that they executed the same, and desired the same be recorded as such.

WITNESS my hand and official seal in the county and state aforesaid this 24th day of March, 2015.

Joseph C. Iacono
Notary Public
My Commission Expires: 12/15/16

Address: 1830 Bath Ave, unit F303
Brooklyn, NY 11214



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EXHIBIT A

The following described Real Estate situated in the County of Cook, in the State of Illinois, to wit:

Lot 26 in Block 1 in Bryn Mawr Addition to Edgewater, being a subdivision of the South 43 Rods of the West $\frac{1}{2}$ of the Southwest $\frac{1}{4}$ East of Clark Street in Section 5, Township 40 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

Parcel ID: 14-05-326-008-0000

Property of Cook County Clerk's Office