



Doc#: 1312233022 Fee: \$74.00
RHSP Fee: \$10.00 Affidavit Fee:
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 05/02/2013 08:58 AM Pg: 1 of 19

FMTIC
S3010528
ILLINOIS STATUTORY
WARRANTY DEED
INDIVIDUAL TO LLC

THE GRANTOR(S)

HE YAN,
AND XINXIN ZHANG, HIS WIFE,
OF THE VILLAGE OF SKOKIE,
COUNTY OF COOK, STATE OF ILLINOIS,
FOR AND IN CONSIDERATION OF TEN
DOLLARS AND OTHER GOOD AND
VALUABLE CONSIDERATION THE RECEIPT
AND SUFFICIENCY OF WHICH IS HEREBY
ACKNOWLEDGED, CONVEY(S) AND WARRANT(S) TO

GREENBLUFF LLC, AN ILLINOIS LIMITED LIABILITY COMPANY OF 10 S
WACKER, #2501, IN THE CITY OF CHICAGO, COUNTY OF COOK AND STATE OF
ILLINOIS,

THE FOLLOWING DESCRIBED REAL ESTATE SITUATE IN THE COUNTY OF COOK,
TO-WIT:

BOX 15

PLEASE SEE ATTACHED LEGAL DESCRIPTION.

FIDELITY NATIONAL TITLE

SUBJECT TO: GENERAL REAL ESTATE TAXES NOT DUE AND PAYABLE AT THE
TIME OF CLOSING, PROVISIONS, COVENANTS AND CONDITIONS OF THE
DECLARATION OF CONDOMINIUM/COVENANTS, CONDITIONS AND RESTRICTIONS
AND ALL AMENDMENTS; PUBLIC AND UTILITY EASEMENTS INCLUDING ANY
EASEMENTS ESTABLISHED BY OR IMPLIED FROM THE DELARATION OF
CONOMINIUM/COVENANTS, CONDITIONS AND RESTRICTIONS OR AMENDMENTS
THERE TO; PARTY WALL RIGHTS AND AGREEMENT; LIMITATIONS AND
CONDITIONS IMPOSED BY THE CONDOOMINIUM PROPERTY ACT; INSTALLMENTS
DUE AFTER THE DATE OF CLOSING OF GENERAL ASSESSMENTS ESTABLISHED
PURSUANT TO THE DECLARATION OF CONDOMINIUM/COVENANTS, CONDITIONS
AND RESTRICTIONS

3
P
S
S
C
NTA

1061

PERMANENT TAX IDENTIFICATION NO: 10-28-201-034-1136 and 10-28-201-034-1114

PROPERTY ADDRESS: 4953 Oakton Street, Unit 211, Skokie, IL 60077
~~107 ALEXANDRIA DRIVE, VERNON HILLS, IL 60061~~

DATED THIS 19TH DAY OF APRIL 2013

* The buyer cannot resell the property
within 30 days of the short sale settlement
date or resell the property for greater
than 120% of the short sale price
within 90 days of the short sale
settlement date.

He Yan by Yoch...
attly on fact
HE YAN

*Xinxin Zhang
by Yoch...*
attly on fact
XINXIN ZHANG

DONE AT CUSTOMER'S REQUEST

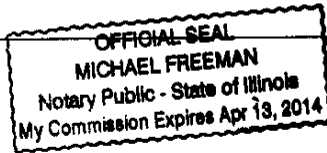
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STATE OF ILLINOIS)
)SS
COUNTY OF COOK)

I, THE UNDERSIGNED, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE AFORESAID, **DO HEREBY CERTIFY** THAT HE YAN AND XINXIN ZHANG, HIS WIFE, PERSONALLY KNOWN TO ME TO BE THE SAME PERSONS WHOSE NAMES ARE SUBSCRIBED TO THE FOREGOING INSTRUMENT, APPEARED BEFORE ME THIS DAY IN PERSON AND ACKNOWLEDGED THAT THEY SIGNED, SEALED AND DELIVERED THIS SAID INSTRUMENT AS THEIR FREE AND VOLUNTARY ACT FOR THE USES AND PURPOSES THEREIN SET FORTH INCLUDING THE RELEASE AND WAIVER OF THE RIGHT TO HOMESTEAD.

GIVEN UNDER MY AND NOTARIAL SEAL THIS 19TH DAY OF APRIL, 2013

Michael Freeman
NOTARY PUBLIC



**AFFIX TRANSFER STAMPS ABOVE
OR**

THIS TRANSACTION IS EXEMPT FROM THE PROVISIONS OF THE REAL ESTATE TRANSFER TAX ACT UNDER PARAGRAPH _____, SECTION 4 OF SAID ACT.

_____ DATE: _____

THIS INSTRUMENT WAS PREPARED BY: MICHAEL FREEMAN



P.O. BOX 1183, WHEELING, ILLINOIS 60090

RETURN TO:

SEND SUBSEQUENT TAX BILLS TO

Motlagh Law Office
2803 Butterfield Rd, Suite 170
Oak Brook, IL 60523

Greenbluff, LLC
10 S. Wacker Dr, Suite 170
Chicago, IL 60606

REAL ESTATE TRANSFER		04/19/2013
	COOK	\$55.00
	ILLINOIS:	\$110.00
	TOTAL:	\$165.00

~~VILLAGE OF SKOKIE, ILLINOIS
Economic Development Tax
Skokie Code Chapter 98
Paid: \$330
Skokie Office 04/18/13~~

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FIDELITY NATIONAL TITLE INSURANCE COMPANY

900 SKOKIE BLVD #112, NORTHBROOK, ILLINOIS 60062

PHONE: (847) 480-1212
FAX: (847) 480-1943

ORDER NUMBER: 2011 053010528 USC
STREET ADDRESS: 4953 OAKTON STREET
UNIT 211

CITY: SKOKIE COUNTY: COOK
TAX NUMBER: 10-28-201-034-1136

LEGAL DESCRIPTION:

UNIT 211 AND PARKING SPACE P-96 IN METROPOLITAN OF SKOKIE CONDOMINIUM, AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE:
THAT PART OF LOT 3 IN METROPOLITAN OF SKOKIE, BEING A SUBDIVISION IN THE NORTHEAST QUARTER OF SECTION 28, TOWNSHIP 41 NORTH, RANGE 13 EAST OF THE THIRD PRINCIPAL MERIDIAN, ACCORDING TO THE PLAT THEREOF RECORDED SEPTEMBER 2, 2005 AS DOCUMENT NUMBER 0524544033, IN COOK COUNTY, ILLINOIS, DESCRIBED AS FOLLOWS: (A) BELOW A HORIZONTAL PLANE AT ELEVATION 630.55 USGS DATUM (B) ABOVE A HORIZONTAL PLANE AT ELEVATION 641.91 USGS DATUM BELOW A HORIZONTAL PLANE AT ELEVATION 664.55 USGS DATUM.
WHICH SURVEY IS ATTACHED AS AN EXHIBIT "E" TO AMENDED AND RESTATED DECLARATION OF CONDOMINIUM RECORDED NOVEMBER 8, 2005 AS DOCUMENT 0531218048, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS AND FIRST AMENDMENT TO DECLARATION OF CONDOMINIUM RECORDED DECEMBER 20, 2005 AS DOCUMENT 0535403095 AND AS MAY BE FURTHER AMENDED FROM TIME TO TIME.

RECORDED AT THE OFFICE OF COOK COUNTY CLERK'S OFFICE

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

**"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 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.

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

Principal's initial AY

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POWER OF ATTORNEY made this 7th day of January 2012

1. I HE YAN

(name)

4953 OAKTON ST., UNIT 211, SKOKIE, IL 60077

(address)

hereby revoke all prior powers of attorney for property executed by me and appoint:

YISHEN SUN

(name)

103 OLD BARN CT., BUFFALO GROVE, IL 60089

(address)

(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 THAT CATEGORY TO BE GRANTED TO THE AGENT. TO STRIKE OUT A CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)

a. Real Estate Transaction

(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 condition on the sale of particular stock or real estate or special rules on borrowing by the agent):

My agent shall not have the power or authority to accept any type of service of process upon myself or Xinxin Zhang with regard to any lawsuits of any type or any alleged defaults of any of my obligations.

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.)

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My agent is empowered to do all acts and execute all documents which I could in order to consummate the sale of the following described real estate commonly known as 4953 Oakton, Unit 211, Skokie, Illinois 60077 and to take the net proceeds of the sale (if any, as this will be a "short sale") and all closing documents and to follow my written instructions regarding the proceeds if any. This is a short sale. My agent shall have full power and authority in my place to negotiate and execute any short sale contracts which shall then be presented to my lender for approval; to negotiate with my lender in my stead with respect to Chase Loan no. 1064270970, to obtain and submit all documents required by my said lender and to authorize Michael Freeman, my attorney and Veron Freeman, his para-legal to negotiate and obtain all documents from and to said Chase concerning this loan and the short sale contemplated. My agent shall also have the authority to execute, in my stead, such "arm's length" statements presented to him by lenders, and any other documents necessary to consummate the closing of this transaction, including, but not limited to, Warranty Deed, transfer tax declarations, Bills of Sale, Affidavits of Title, ALTA statements, Escrow Instructions with the title company, HUD-1 settlement statements, and any other forms usual and customary in such transactions which must be signed. My agent shall have authority to accept any 1099 forms which may be generated the title company.

Finally, my agent shall have full discretion and authority to accept, deny, negotiate and after negotiations, accept or deny any deficiency amounts which my lenders may insist upon as a condition to allow a short sale of this property. I understand that if my agent denies the bank's the right of such deficiency, this may result in Foreclosure Proceedings being pursued against the property and myself with a resultant Judgment For Foreclosure, Sale and a finding of a deficiency judgment against myself and/or my wife.

SEE ATTACHED LEGAL DESCRIPTION

(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 my successor) named by me who is acting under this power of attorney at the time of reference.

NONE

(YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTORNEY. STRIKE OUT THE

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NEXT SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

- 5. My agent shall not be entitled to compensation for services rendered as agent under this power of attorney.

NONE

(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 LIMITATION ON THE BEGINNING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:)

- 6. This power of attorney shall become effective on execution
(Note: Insert a future date or event during your lifetime, such as a court determination 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 after the closing of 4953 OAKTON ST. #211, SKOKIE, ILLINOIS 60077.

(NOTE: Insert a future date or event, such as a court determination that you are not under a legal 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 SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(S) OF EACH SUCCESSOR(S) IN PARAGRAPH 8.)

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

XINXIN ZHANG

(name)

4953 OAKTON ST., #211, SKOKIE, ILLINOIS 60077

(address)

For the 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

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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.)

(name)

(address)

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.

NONE

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: Jan 7 2012

x. [Signature]
Signed: (principal)

(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 HE YAN 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 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: 1/7/12


[Signature]
Witness

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Specimen signatures of agent (and successors)

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

YS 
(agent)

X 
(principal)

(THE NAME AND ADDRESS, AND PHONE NUMBER OF THE PERSON PREPARING THIS FORM OR WHO ASSISTED THE PRINCIPAL IN COMPLETING THIS FORM SHOULD BE INSERTED BELOW)

This document was prepared by:

Michael Freeman
P.O. Box 1183
Wheeling, Illinois 60090
Phone: (847) 459-3894

Property of Cook County Clerk's Office

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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 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:

- (1) act so as to create a conflict of interest 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 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.

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EXHIBIT TO THE DEED.

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

"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 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.

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

Principal's initial XZ

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POWER OF ATTORNEY made this 7th day of January 2012

1. I XINXIN ZHANG

(name)

4953 OAKTON ST., UNIT 211, SKOKIE, IL 60077

(address)

hereby revoke all prior powers of attorney for property executed by me and appoint:

YISHEN SUN

(name)

103 OLD BARN CT., BUFFALO GROVE, IL 60089

(address)

(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 THAT CATEGORY TO BE GRANTED TO THE AGENT. TO STRIKE OUT A CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)

a. Real Estate Transaction

(NOTE: LIMITATIONS ON AND ADDITIONS TO THE AGENT'S POWERS MAY BE INCLUDED IN THIS POWR OF ATTORNEY IF THEY ARE SPECIFICALLY DESCIBED 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 condition on the sale of particular stock or real estate or special rules on borrowing by the agent):

My agent shall not have the power or authority to accept any type of service of process upon myself or He Yan with regard to any lawsuits of any type or any alleged defaults of any of my obligations.

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.)

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My agent is empowered to do all acts and execute all documents which I could in order to consummate the sale of the following described real estate commonly known as 4953 Oakton, Unit 211, Skokie, Illinois 60077 and to take the net proceeds of the sale (if any, as this will be a "short sale") and all closing documents and to follow my written instructions regarding the proceeds if any. This is a short sale. My agent shall have full power and authority in my place to negotiate and execute any short sale contracts which shall then be presented to my lender for approval; to negotiate with my lender in my stead with respect to Chase Loan no. 1064270970, to obtain and submit all documents required by my said lender and to authorize Michael Freeman, my attorney and Veron Freeman, his para-legal to negotiate and obtain all documents from and to said Chase concerning this loan and the short sale contemplated. My agent shall also have the authority to execute, in my stead, such "arm's length" statements presented to him by lenders, and any other documents necessary to consummate the closing of this transaction, including, but not limited to, Warranty Deed, transfer tax declarations, Bills of Sale, Affidavits of Title, ALTA statements, Escrow Instructions with the title company, HUD-1 settlement statements, and any other forms usual and customary in such transactions which must be signed. My agent shall have authority to accept any 1099 forms which may be generated the title company.

Finally, my agent shall have full discretion and authority to accept, deny, negotiate and after negotiations, accept or deny any deficiency amounts which my lenders may insist upon as a condition to allow a short sale of this property. I understand that if my agent denies the bank's the right of such deficiency, this may result in Foreclosure Proceedings being pursued against the property and myself with a resultant Judgment For Foreclosure, Sale and a finding of a deficiency judgment against myself and/or my wife.

SEE ATTACHED LEGAL DESCRIPTION

(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 my successor) named by me who is acting under this power of attorney at the time of reference.

NONE

(YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTORNEY. STRIKE OUT THE

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NEXT SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

- 5. My agent shall not be entitled to compensation for services rendered as agent under this power of attorney.

NONE

(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 LIMITATION ON THE BEGINNING DATE OR DURATION IS MADE BY INITIALING AND COMPLETING EITHER (OR BOTH) OF THE FOLLOWING:)

- 6. This power of attorney shall become effective on execution
(Note: Insert a future date or event during your lifetime, such as a court determination 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 after the closing of 4953 OAKTON ST. #211, SKOKIE, ILLINOIS 60077.

_____(NOTE: Insert a future date or event, such as a court determination that you are not under a legal 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 SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(S) OF EACH SUCCESSOR(S) IN PARAGRAPH 8.)

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

HE YAN
(name)
4953 OAKTON ST., #211, SKOKIE, ILLINOIS 60077
(address)

For the 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

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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.)

(name)

(address)

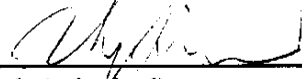
9. If a guardian of my estate (my property) is to be appointed, I nominate the agent acting under this power of attorney as such guardian, to serve without bond or security.

NONE

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: Jan 7th, 2012

x 
Signed: (principal)

(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 XINXIN ZHANG 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 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: 1/7/12



Witness

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Specimen signatures of
agent (and successors)

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

ys 
(agent)

x 
(principal)

(THE NAME AND ADDRESS, AND PHONE NUMBER OF THE PERSON PREPARING THIS FORM OR WHO ASSISTED THE PRINCIPAL IN COMPLETING THIS FORM SHOULD BE INSERTED BELOW)

This document was prepared by:

Michael Freeman
P.O. Box 1183
Wheeling, Illinois 60090
Phone: (847) 459-3894

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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 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:

- (1) act so as to create a conflict of interest 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 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.