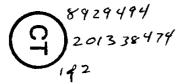


Doc#: 1322441118 Fee: \$56.00 RHSP Fee:\$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds

Date: 08/12/2013 12:14 PM Pg: 1 of 10



NOTICE TO THE INDIVIDUAL SIGNING THE ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

PLEASI, READ THIS ARTICLE CAREFULLY. The form that you will be signing is a legal document. It's coverned 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 yower 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 coagents.

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 aftent 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 at 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 Fower 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 his form are instructions.

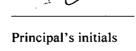


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You are not required to sign this Power of Attorney, but it will not take effect without your signature. You should not sign this Power of Attorney if you do not understand everything in it, and what your agent will be able to do if you do sign it.

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



ILLINOIS STATUTORY SHORT FORM

1. I, Susan Chang of 2764 Channon Road, Northbrook, IL hereby revoke all prior powers of attorney for property executed by me and appoint: David Chang of 2764 Shannon Road, Northbrook, IL

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, (i. zluding all amendments), but subject to any limitations on or additions to the specified powers incerted in paragraph 2 or 3 below: Control Contro

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

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2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars:
NONE
3. In addition to the powers granted above, I grant my agent the following powers:
NONE
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 arrenced or revoked by any agent (including any successor) named by me who is acting under this power of attorney at the time of reference.
5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.
6. (X) This power of attorney shall become effective upon execution.
7. (X) This power of attorney shall terminate on7/30/2013
8. If any agent named by me shall die, become incompetent, resign or reduse 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:
NONE
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.

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 guarding, to serve without bond or security.

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

Dated: 7- 9 -	Zol3 Signed_		<u></u>	(principal)
same person whose na before me and the not free and voluntary act or her to be of sound r is not: (a) the attendin or provider; (b) an ow which the principal is such parent, sibling, o the foregoing power o (d) an agent or success	ess certifies that	edged signing and de uses and purposes the undersigned witness ealth service provide to of an owner or ope a parent, sibling, de the principal or any ap a relationship is by b going power of attor	ng power of att elivering the in- herein set forth also certifies the er or a relative of rator of a health escendant, or an gent or success blood, marriage mey.	orney, appeared strument as the i. I believe him hat the witness of the physician h care facility in spouse of or agent under
Date: 7/9/2013	Signed: M	the Mar	drv (Wit	tness)
		40		
me to be the same per- attorney, appeared befinstrument as the free forth. I believe him or certifies that the witne relative of the physicis of a health care facility descendant, or any spe- agent or successor age	undersigned witness cerson whose name is subsection whose name is subsectione me and the notary pand voluntary act of the her to be of sound minders is not: (a) the attending an or provider; (b) an oway in which the principal puse of such parent, sible ent under the foregoing poption; or (d) an agent of such parent of the principal poption; or (d) an agent of the such parent of the principal poption; or (d) an agent of the such parent of the principal poption; or (d) an agent of the such parent of the principal poption; or (d) an agent of the such parent p	cribed as principed to ublic and acknowled principal, for the used and memory. The used and memory. The used and physician or men wher, operator, or related is a patient or reside ing, or descendant of power of attorney, we	d sed signing ar sea and purpose undersigned wi tal health servi lative of an ovent; (c) a parent of either the print whether such rel	nd delivering the es therein set tness also ce provider or a mer or operator a, sibling, nc. pal or any lationship is by
Dated:	Signed:		(V	Vitness)

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State of		_
County of	Cook ?	SS.
The unsubscribed as witness(es) Dacknowledge principal, for	principal to the forem principal to the forem ichelle Mar d signing and deliver the uses and purpose of the agent(s)).	public in and for the above county and state, certifies that, known to me to be the same person whose name is going power of attorney, appeared before me and the
Specimen sig agent (and su		I certify that the signatures of my agent (and successors) are genuine
(agent)		(principal)
(successor ag	ent)	(principal)
(successor ag	ent)	(principa)
Name: Address: Phone:	Chang and Carlin 1305 Remington R 847-843-8600	oad, Suite C, Schaumeurg, IL 60173

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(This page is not part of official statutory form. It is only for the Agent's use in recording this form when necessary for Real Estate Transactions)

For the premises commonly known as:

Permanent In Jex Number(s):

Legal Description:

ins (The name and address of the person preparing this form should be insected if the Agent will have the power to convey any interest in Real Estate.)

This instrument was prepared by:

Chang and Carlin 1305 Remington Road, Suite C Schaumburg, IL 60173

Recorder - Mail recorded document to:

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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 to 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 authori y granted in this power of attorney;
 - c. Commingle the principal's funds with your funds;
 - d. Borrow funds or other property from he principal, unless otherwise authorized;
 - e. 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, c. 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 in the principal by writing or printing the name of the principal and singing your own name "as Agent" in no 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 Pover 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 fiat's 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 advige from an attorney.

Agent's Initials

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AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY

I, David Chang, (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
Susan Chang (insert name of principal).
I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, 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.
l accept appointment as agent under this power of attorney.
This certification and acceptance is made under penalty of perjury.* Dated: 1912 (Agent's Signature)
Canada al suca
(Print Agent's Name)
2764 Sharmon Rd. Narhbruk A 60062
(Agent's Address)
*(NOTE: Perjury is defined in section 32-2 of the Criminal Code of 1961, (720 ILCS 5/32-2) and is a Class 3 felony.)

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Agent's Certification and Acceptance of Authority Form 7/1/11

(Text of Section after amendment by P.A. 96-1195)

Sec. 2-8. Reliance on document purporting to establish an agency.

(a) Any person who acts in good faith reliance on a copy of a document purporting to establish an agency will be fully protected and released to the same extent as though the reliant had dealt directly with the named principal as a fully-competent person. The named agent shall furnish an affidavit or Agent's Certification and Acceptance of Authority to the reliant on demand stating that the instrument relied on is a true copy of the agency and that, to the best of the named agent's knowledge, the named principal is alive and the relevant powers of the named agent have not been altered or terminated; but good faith reliance on a document purporting to establish an agency will protect the reliant without the affidavit or Agent's Ceration and Acceptance of Authority.

(b) Upon reque st, he named agent in a power of attorney shall furnish an Agent's Certification and Acceptance of Autocaty to the reliant in substantially the following form:

named of to the res.

County Clarks Office

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CHICAGO TITLE INSURANCE COMPANY

ORDER NUMBER: 1410 008929494 UA STREET ADDRESS: 2764 SHANNON RD

CITY: NORTHBROOK COUNTY: COOK

TAX NUMBER: 04-09-100-064-0000

LEGAL DESCRIPTION:

LOT 12 IN BLOCK 114 IN WHITE PLAINS UNIT NO. 6, BEING A SUBDIVISION IN SECTION 9, TOWNSHIP 42 FORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

LEGALD

07/17/13

DN5