1. 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 into se 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 his 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 to at this Power of Attorney will be in effect, your agent may exercise the powers given to him or her throughout your reletime, both before and after you become incapacitated. A court, however, can take away the powers of your agent in 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 initials (Borrower(s))

14125410/4

Doc#: 1412541079 Fee: \$76.00 RHSP Fee: \$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 05/05/2014 11:26 AM Pg: 1 of 6

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2. ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

The space above for Recorders Use Only
This Power of Attorney is being created for the purpose of Purchase(drop down choice) of the property located at:
Street address: 1235 S. Prairie Ave., Unit 1003
City Chicago State IL Zip 60605
Permanent Tax !D# 17-22-110-125-1046 / 17-22-110-125-1377

I, Shiwen Shen
Street Address: 555 v. Madison St., Apt. 1712
City:Chiago State: IL Zip: 60661
(insert name and address of principal above) hereby revoke all prior powers of attorney for property executed by me and appoint:
Cen Guo
Street Address: 555 W. Madison St., Apt 1712
City:Chicago State: IL Zip: 60661
(NOTE: You may not name co-agents using this form.) (inser name and address of agent) 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 Atomey for Property Law" (including all
amenaments), 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 owers 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 transactions.
(e) Stock and bond transactions.
(b) Financial institution transactions. (c) Stock and bond transactions. (d) Tangible personal property transactions. (e) Safe deposit box transactions:
(e) Safe deposit box 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

(o) All-other property transactions.

(f) Insurance and annuity transactions.
(g) Retirement plan transactions.

(k) Commodity and option transactions.

(i) Tax matters.

(j) Claims and litigation.

(l) Business operations.

(m) Borrowing transactions.

(n) Estate transactions.

(h) Social Security, employment and military service benefits.

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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, exer powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below.) Not Applicable	ercise lly

(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 agen' 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 me ting to any person or persons whom my agent may select, but such delegation may be amended or revoked by any pent (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 cimbursement 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 rev (ked 'ry 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 !!..i' attorn on the beginning date or duration is made by initialing and completing one or both of paragraphs 6 and 7.)

- 6. (XX) This power of attorney shall become effective on (Month/Date/Year): April 2, 2014. (NOTE: Insert a future date or event during your lifetime, such as a count 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. (XX) This power of attorney shall terminate on (Month/Date/Year): May 31, 2014. (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 one or more successor agents, insert the name and address of eac i suc essor agent 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:

Not Applicable_

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.)

- 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

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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. 04/02/2014 Dated: 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.) Shirven Shen The undersigned witness certifies that , known to me to be the same person whose prime is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and action redged 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 yoness 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, mar riage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney. Signed (NOTE: Illinois requires only one witness, but other jurisdictions row 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 , 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 minu 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 pow a of attorney, whether such relationship is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing

(Witness)

power of attorney.

Dated: Signed

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State of		
SSN:		
County of Cook		
The undersigned, a notary public	in and for the abo	ove county and state, certifies
- "I'M SHIMA SHIMA	kno	Own to me to be the semi-
principal to the foregoing power of	or autorney, appea	ired before me and the witness(es) (A D in : 7 h a n a
\	I III DE	PENOTE STORE SECTION AND ADDRESS OF THE SECTION ADD
the free and voluntary act of the p	unicidal, for the in	ises and purposes therein set forth (, and certified to the
correctness of the signature(s) of	the agent(s)).	
Space below for Now, y Seal		Dated: 4-2-14
		Notary Public Susant. Brocents
		Signature: SURVINE DE COMME
~~~~~~~~		My commission expires: //-8-15
OFFICIAL SEAL	$O_{\mathcal{R}}$	my commission expires
SUSAN K BROCIOUS		(NOTE: You may but are not no mind
NOTARY PUBLIC - STATE OF ILLINOIS	<b>3</b> ( )	(NOTE: You may, but are not required to, request your agent
MY COMMISSION EXPIRES:11/08/15		and successor agents to provide specimen signatures below.
***************************************		you include specimen signatures in this power of attorney, yo must complete the certification opposite the signatures of the
		agents.)
		("80,111)
		Specimen signatures of
I certify that the signatures agent (a	and successors) o	of my agent (and successors) are genuine.
,	,	and the subsection of the gendine.
		1/X,
(agent)	(principal)	
	_	
(successor agent)	(principal)	
	• •	<b>10</b> .
		~/
(successor agent)	(principal)	<i>T</i>
	• ,	0,
(NOTE: The name, address, and ph	one number of th	ne person preparing this form or who assisted the principal in
completing this form should be inse	rted below.)	1 1 G y or who distribute in
Tem / X		ne person preparing this form or who assis ed t ie principal in
Name: July Den	ubelis	<u>'C</u>
2/2		
Address: 767 WALTON	s (bue	
a Elandota	<b>+</b> /	/m25
City: Grayslake State:	Zip	:_6W1U
Phone: 747-271-7703	- •	

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### **UNOFFICIAL COP**

STREET ADDRESS: 1235 S. PRAIRIE AVE

COUNTY: COOK

TAX NUMBER: 17-22-110-125-1046

LEGAL DESCRIPTION:

PARCEL 1:

CITY: CHICAGO

UNITS 1003 AND GU-91 IN THE TOWER RESIDENCES CONDOMINIUMS, AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED PROPERTY:

LOT 1 IN KILEY'S SUBDIVISION, BEING A SUBDIVISION OF PART OF THE LAND PROPERTY AND SPACE IN FRACTIONAL SECTION 22, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, (EXCEPT THAT PART OF LOT 1 IN KILEY'S SUBDIVISION, BEING A SUBDIVISION OF PART OF THE LAND PROPERTY AND SPACE IN FRACTIONAL SECTION 22, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING BELOW A HORIZONTAL PLANE HAVING AN ELEVATION OF 25.18 CHICAGO CITY DATUM AND LYING ABOVE A HORIZONTAL PLANE HAVING AN ELEVATION OF 14 88 CHICAGO CITY DATUM AND LYING WITHIN ITS HORIZONTAL BOUNDARY PROJECTED VERTICAL'Y AND DESCRIBED AS FOLLOWS: COMMENCING AT THE SOUTHWEST CORNER OF SAID LOT 1; THENCE NOWTH 00°00'00" EAST, ALONG THE WEST LINE THEREOF, 19.36 FEET; THENCE SOUTH 90°00'00" EAST, 26 32 FEET TO THE POINT OF BEGINNING; THENCE NORTH 00004'10" WEST, 36.31 FEET; THENCE NORTH TLY 13.18 FEET ALONG THE ARC OF A CIRCLE, HAVING A RADIUS OF 136.61 FEET, CONVEX WESTERLY, AND WHOSE CHORD BEARS NORTH 13°48'32" WEST A DISTANCE OF 13.17 FEET; THENCE NORTH 70~23'29" EAST, 0.41 FEET; THENCE NORTH 88°19'45" EAST, 5.41 FEET; THENCE SOUTH 00°28'25" WEST, 1.13 FEET; THENCE SOUTH 89°54'00" EAST, 1.72 FEET; THENCE SOUTH 00011'42" EAST, 2.94 (EET; THENCE SOUTH 88°36'47" EAST, 2.79 FEET; THENCE SOUTH 00°05'25" WEST, 9.70 FEET; THENCE NORTH 89°34'58" EAST, 1.41 FEET; THENCE NORTH 00018'21" EAST, 0.41 FEET; THENCE SOUTH 39" EAST, 8.87 FEET; THENCE SOUTH

WEST, 0.83 FEET; THENCE SOUTH 89°41'50" EAST, 388 FEET; THENCE NORTH 00°18'10" EAST, 1.99 FEET; THENCE NORTH 89°48'37" EAST, 14.33 FEET, TENCE NORTH 00°18'17" EAST, 1.69 FEET; THENCE NORTH 89°52'08" EAST, 14.43 FEET; THENCE SCUTH 00°11'08" EAST, 5.26 FEET; THENCE SOUTH 89°49'40" EAST, 14.33 FEET; THENCE SOUTH 00°07 27" WEST, 25.19 FEET; THENCE SOUTH 89°52'13" EAST, 5.67 FEET; THENCE SOUTH 00°57'07" WEST, 8.32 FEET; THENCE WESTERLY 70.75 FEET ALONG THE ARC OF A CIRCLE, HAVING A RADIUS OF 128.13 FEET, CONVEX SOUTHERLY, AND WHOSE CHORD BEARS SOUTH 89°59'01" WEST A DISTANCE OF 69.36 PEET TO THE POINT OF BEGINNING), IN COOK COUNTY, ILLINOIS; WHICH SURVEY IS ATTACHED TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT 0613532041, TOGETHER WITH AN UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS.

#### PARCEL 2:

THE EXCLUSIVE RIGHT TO USE STORAGE SPACE S-46, A LIMITED COMMON ELEMENT AS LELINEATED ON THE SURVEY ATTACHED TO THE DECLARATION AFORESAID RECORDED AS DOCUMENT 0613532041.

#### PARCEL 3:

NON-EXCLUSIVE EASEMENT FOR THE BENEFIT OF PARCEL 1 AND OTHER PROPERTY FOR PEDESTRIAN AND LIMITED VEHICULAR INGRESS AND EGRESS AS CREATED BY GRANT OF ACCESS EASEMENT AND AGREEMENT FOR USE AND MAINTENANCE OF EASEMENT PARCEL RECORDED JULY 27, 2000 AS DOCUMENT NUMBER 00570791 MADE BY CHICAGO TITLE TRUST NUMBER 1080000 AND MUSEUM PARK EAST, LLC. AND AMENDED BY DOCUMENT RECORDED APRIL 24, 2002 AS NUMBER 0020470285.