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Karen A.Yarbrough

Cook County Recorder of Deeds
Date: 07/01/2014 12:04 PM Pg: 1 of 8

PRAIRIE TITCE 6821 W. NORTH AND OAK PARK, IL 603

ILLINOIS STATUTORY

SHORT FORM

POWER OF ATTORNEY FOR PROPERTY

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1406.55483

Prepared by: Sullivan Law Offices, LLC, 107 N. Marion, Oak Fark, Illinois 60301

Mail to: Sullivan Law Offices, LLC, 107 N. Marion, Oak Park, Illinois 60301

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#### 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:

Frincipal's initials

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

(insert name and address of agent)

(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 Lav (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. Failur, 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.
- (b) Financial institution transactions.
- (m) Borrowing transactions.
- (o) All other property transactions.

(NOTE: Limitations on and additions to the exent'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.)

NO RESTRICTIONS			
		 • • • • • • • • • • • • • • • • • • • •	•••••

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 imitation, 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.)

TO EXECUTE ANY AND ALL DOCUMENTS AND MAKE ANY AND ALL DECISIONS NECESSARY TO EFFECTUATE THE CLOSING OF THE SALE OF 680 NORTH LAKE SHORE DRIVE, UNIT 613, CHICAGO, ILLINOIS 60611-4459

(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.)

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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 on UPON EXECUTION OF THIS POWER OF (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 on UPON COMPLETION OF THE CLOSING OF THE SALE OF 680 NORTH LAKE SHORE DRIVE, UNIT 613, CHICAGO, ILLINOIS 60611-4459. (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 each successor 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 For purposes of 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 of the person is unable to give prompt and intelligent consideration to business matters, as certified by a liscused 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 arent 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.) 11. The Notice to Agent is incorporated by reference and included as part of this form Dated: 6 - 2 4 - 14

(principal)

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(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.)

before me and the n voluntary act of the p mind and memory. To or mental health serv of an owner or opera sibling, descendant, or or successor agent u or adoption; or (d) an	on whose name totary public are incipal, for the he undersigned rice provider or ator of a health or any spouse conder the forego agent or succession.	hat ENRIQUE ROMERO e is subscribed as prince nd acknowledged signing e uses and purposes the d witness also certifies to a relative of the physicilal care facility in which the of such parent, sibling, coing power of attorney, essor agent under the for	ipal to the foregoing ig and delivering the erein set forth. I belie that the witness is no an or provider; (b) a ne principal is a pat or descendant of eith whether such relation	power of attorney e instrument as the eve him or her to bot: (a) the attending in owner, operator, ient or resident; (c) her the principal or onship is by blood	, appeared e free and e of sound g physician or relative ) a parent
Dated:	1		/) /	100	
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(NOTE: Illinois requir	es only one wi	itness, but other jurisdic	tions may require m	acro than one with	16
wish to have a second	d witness, have	him or her certify and s	iions may require m sign here:)	iore inan one with	əss. If you
me and the notary pu act of the principal, fo memory. The undersigned the alth service provide owner or operator of a descendant, or any successor agent under adoption; or (d) an age	se name is sub blic and acknown the uses and gned witness a er or a relative a health care fa spouse of such er the foregoing ent or successo	withess certifies that described as principal to to wledged signing and despurposes increin set foulso certifies that the with of the physician or preactility in which the rinder parent, sibling, or design power of attorney, who or agent under the foregone.	he foregoing power elivering the instrumenth. I believe him or ness is not: (a) the a povider; (b) an owne ipal is a patient or no cendant of either the elber such relations	of attorney, appea ent as the free and her to be of sound attending physician r, operator, or rela esident; (c) a paren he principal or any hin is by blood, ma	red before voluntary mind and or mental tive of an nt, sibling,
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County of COOK	) SS.				
	,			Visc.	
foregoing power of att	, known to me corney, appeare) in t of the principle nature(s) of the	n and for the above counto be the same person and the way person and acknowledge, for the uses and properties of the person and acknowledge, for the uses and properties of the person acknowledge and person acknowledge ack	whose name is suritness(es)	bscribed as principle 806A117US	pal to the
My commission exp	ires 12 126 11	Б	Notary Public	_	
(NOTE: You may but	are not requir	ed to request voice	and and		

(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.)

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Specimen signatures of agent (and successors)		I certify that the signatures of my agent (and successors) are genuine.		
(agent	t)	(principal)		
(successo	or agent)	(principal)		
(successor egant)		(principal)		
(NOTE: The	e name, address, and phone number of the noipal in completing this form should be insert	ne person preparing this form or who assisted the ted below.)		
Name:	WILLIAM 5. SULLIVAN			
Address:	107 N. MARION STREET			
	OAK PARK, ILLINOIS 6)301			

#### "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:

708-445-2303

(1) do what you know the principal reasonably expects you to do wr't the principal's property;

(2) act in good faith for the best interest of the principal, using one care, competence, and diligence;

(3) keep a complete and detailed record of all receipts, disburs ments, 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;

Phone:

(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.

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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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#### LEGAL DESCRIPTION

#### PARCEL 1:

UNIT 613 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN 680 SOUTH RESIDENCE CONDOMINIUM AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NO. 26188405, AS AMENDED, IN THE NORTH ½ OF SECTION 10, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

#### PARCEL 2:

EASEMENTS APPURTENANT TO AND FOR THE BENEFIT OF PARCEL 1 AS SET FORTH AND DEFINED IN THE DECLARATION OF EASEMENTS RECORDED AS DOCUMENT NO. 26320245 AND RECORDED AS DOCUMENT NO. 26407239, AS AMENDED BY DOCUMENT NO. 26407240 AND AS CREATED BY DEED RECORDED AS DOCUMENT NO. 89138184 FOR INGRESS AND EGRESS, ALL IN COOK COUNTY, ILLINOIS.

PERMANENT INDEX NUMBER: 17-10-202-062-1034

COMMONLY KNOWN AS: 680 NORTH LAKE SHORE DRIVE, UNIT 613, CHICAGO, ILLINOIS 60611-4459