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Karen A. Yarbrough

Cook County Recorder of Deeds Date: 03/04/2015 01:35 PM Pg: 1 of 7

ILLINOIS STATUTORY SHORT FORM

FOWER OF ATTORNEY FOR PROPERTY

Prepared by: Albert J. Beaudreau, Attomey at Law, 11340 W. 159th Street, Orland Park, IL 60467 10 V.

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Mail to:

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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

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 initials

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I.
Michael J. Serio (Insert name and address of principal) hereby revoke all prior powers of attorney for
Joseph P. Serio 10530 Levily executed by me and appoint
(insert name and adjust 1 ane, Frankfort, IL 60423
/A(/\TPL_\
as my attorney-in-fact (my "agent") to act for me and in my name (in any way I could act in person) with for Property I and (including powers, as defined in Section 3-4 of the "Statutory Short Form Party I and (including powers).
respect to the following naviors and in my name (in any way I could not be naviors)
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:
(NOT: You must strike out any one or more of the following categories of powers you do not want category to be any need to the title of any category will cause the powers described in the category to be any need to the strike the title of any category will cause the powers described in the category to be any need to the strike the title of any category will cause the powers described in the category to be any need to the category to be any catego
category to he regulare to strike the title of any category will cause the adverse you do not want
your agent to here. Failure to strike the title of any category will cause the powers you do not want category to be granted to the agent. To strike out a category you must draw a line the category.
category to be are relative to strike the title of any category will cause the powers described in that category.)
(a) Real estate transcoons.
(D) Financial institution from actions
(c) Stock and bond transactions
(C) I andible personal property (company)
(*) YEIG WOODE DOE FRANCE AND A COMMENT OF THE COME
(f) Insurance and annuity transactions
(g) Retirement plan transactions.
(b) Social Security complement
(h) Social Security, employment and military socice benefits. (i) Tax matters.
(i) Claims and litigation.
(k) Commodity and option transactions.
(i) pagitegs obstations
(m) Borrowing transactions.
(II) Estate transactions.
(o) All other property transactions.
NOTE: Limitations on and additions to the agent's powers may be included in this power of attorney if
ney are specifically described below.)
2. The powers granted above shall and the control of the control o
2. The powers granted above shall not include the following powers or shall be medified or limited in
of the state of limited in
IOTE: Here you may include any include any
onditions on the sale of notice any specific limitations you deem appropriate and
NOTE: Here you may include any specific limitations you deem appropriate, such as a probletion or local conditions on the sale of particular stock or real estate or special rules on borrowing by the agents
an Adent's Power
In addition to the powers granted above, I grant my agent the following powers:
OTE: Here you may add an an a
Proise noware of any other delegable powers including with and the second
OTE: Here you may add any other delegable powers including, without limitation, power to make gifts, st specifically referred to holes.
Additional Powers

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(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 reasonar's compensation for services as agent.)

5. My aurant shall be entitled to reasonable compensation for services rendered as agent under this power of alcoure.

(NOTE: This power of attorney may be amended or revoked by you at any time and in any manner.

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 (NOTE: Insert a future date or event during your lifetime, such as a court determination of your disability take effect.) 7. () This power of attorney shall terminate on
(NOTE: Insert a future date or event, such as a court determination that you are not under a legal 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 such agent. I name the following (each to act alone and successively, in the order named) as successor(s) to
FOLDIMONA
For purposes of paragraph 8, a person shall be considered to be incompetent if and while the person is a 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 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.

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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.

(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: January 29, 2015 (NOTE: This power of at orney 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 certines that the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and rick nowledged signing and delivering the instrument as the free and , known to me to be voluntary act of the principal, for the use; and purposes therein set forth. I believe him or her to be of sound mind and memory. The undersigned vitness also certifies that the witness is not: (a) the attending physician or mental health service provider or a lelative 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 Dated: (NOTE: Illinois requires only one witness, but other jurisdictions may 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 Michael J. Serio 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 Dated: Witness

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State of \mathcal{M}	
County of Charles SS.	
The undersigned, a notary public in and for the Michael J. Serio known	e above county and otate
(Division to the loregoing power of attorn	nov and sallie person whose name in
in nerson and act of the first and	me and the witnessies!
	and certified to the correctness of the signature(s)
Dates:	X/Inhu Cucha
My commission expires (MY COMMISSION EXPIRES 10-28-2015)	Notary Public
(NOTE: You may, but we not required to, request your signatures below. If you include specimen signatures in certification opposite the signatures of the agents.) Specimen signatures of agent	
Joseph P. Serio	l certify that the signatures of my agent (and successors)are genuine.
(agent)	Michael J. Serio (principal)
(successor agent)	Michael J. Serio
(successor agent)	(principal)
(NOTE: The name, address, and phone number of the pe principal in completing this form should be inserted	Mishael J. Serio (principal) erson preparing this form or who assisted the ed below.)
Name: Albert J. Beaudreau	4
Address: Attorney at Law, 11340 W. 159th Street	
Orland Park, IL 60467	
Phone:	CO

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ILLINOIS STATUTORY SHORT FORM

POWER OF ATTORNEY FOR PROPERTY Addendum

Property And less:

11258 Brook Crossing Court

Orland Park, IL 6046

Permanent Index Number: 27-30-414-007-0000

Legal Descripton

LOT 11-2 IN BROOK HILLS P.U.D. TOVINHOMES PHASE 2, BEING A PLANNED UNIT DEVELOPMENT IN THE SOUTHEAST QUARTER OF SECTION 30, TOWNSHIP 36 NORTH, RANGE 12, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY ILLINOIS

PARCEL 2:

EASEMENT FOR INGRESS AND EGRESS APPIRITINANT TO AND FOR THE BENEFIT OF PARCEL 1 AS SET FORTH IN THE DECLARATION OF COVENANTS, CONDITIONS, RESTRICTIONS AND EASEMENTS FOR BROOK HILLS TOWNHOMES RECORDED OCTOBER 18, 1989 AS DOCUMENT NUMBER 89492484 AS AMENDED FROM TIME TO TIME AND AS CREATED BY DEED FROM MARQUETTE NATIONAL BANK, A NATIONAL BANKING ASSOCIATION, AS TRUSTEE UNDER TRUST AGREEMENT DATED NOVEMBER 18, 1976 KNOWN AS TRUST NUMBER 7565 TO KATHERINE SERIO RECORDED DECEMBER 18, 1990 AS **DOCUMENT NUMBER 90612809**

PARCEL 3:

NON-EXCLUSIVE EASEMENT FOR INGRESS AND EGRESS FOR THE SEMEFIT OF PARCEL 1 FOR VEHICULAR INGRESS AND EGRESS OVER LOT C AS SET FORTH IN THE PLAT OF SUBDIVISION RECORDED AS DOCUMENT NUMBER 90264144 AND CREATED BY THE DEED REFERRED TO IN PARCEL 2 ABOVE