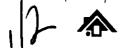
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ATTORNEYS' TITLE **GUARANTY** FUND. INC.

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Doc#: 1614142043 Fee: \$42.00 RHSP Fee: \$9.00 RPRF Fee: \$1.00

Karen A. Yarbrough

Cook County Recorder of Deeds Date: 05/20/2016 11:10 AM Pg: 1 of 3

	LIMITI	SD POWER OF	ATTORNEY		
KNOW ALL MEN BY THESE PPA	SENT THAT I,	Huan Wang			
7			Name of	Principal	, ,
of 2693 Lisa Ct	$O_{\mathcal{X}}$	, Northbrook	.IL	60062	, have made, constituted,
Address		City	State	Zip	constituted,
nd appointed and by these presents	do make, onstitu	ate, and appoint		Yupeng Ren	
rue and lawful attorney for me and i	n my name, piec	and stead to transac	all business and i	Name of Agent	vladaa and dalli
n contracts, accas, notes, trast acca	s, mortgages, ass	normounts of rent, was	vers of homestead.	riabte offidovite kille	
aicinicius, 1077s, and other tax-reja	ilea documents a	nd of her instruments	and to endorce and	d nagotioto abaala	4 1.511
Maisire of brober to effectivite the	- saie or burchase	? Of the Gremites, the	legal decorintion	of which is an Carl	below or attached
ereto and made a part hereof, and fu	irther described a				
roperty Address: 2693 Lisa Ct	4.11	(/_	, Northbrook	, IL State	60062
oan#:2059615860	Address		City	State	Zip
as offestually in many t					
I as effectually in respects as I cou	ild do personally	, giving and granting	unto the said Atto	rney full power and	authority to do and
erform all and every act and thing	wnatsoever, requ	isite and necessary to	be done in and al	oout the premises, as	fully, to all intents
nd purposes, as I might or could do utifying and confirming all that the s	n personany pre said Attorney or t	sent at the doing the	eof, with tuli naw	er of substitution and	revocation, hereby
and the s	ara Autorney or t	ile substitute shall lav	iully do of cause t	be done by virtue he	ereof.
pated this 29 day of	02 .	201h	4	$T_{\lambda}$	0
Day	Month	Year	Muse Illa	40	3
١,			Huan Wa		D
STATE OF	10			Signature of Primara	
TAIL OF	41 3				S
COUNTY OFCOOL		SS		(0)	
					<b>N</b> 26
he undersigned, a notary public in a	nd for the above	county and state, cert	ifies that Huan Wa	no	ini
				M. CD	
nown to me to be the same person w	nose name is sui	oscribed as principal (	o the foregoing po	wer of attorney, appea	ared before me and
ne witness	NO ()	000	in person and a	cknowledged signing	and delivering the
Strument as the free and voluntary of	Name of Witness	=	<b>A</b>	-	
nstrument as the free and voluntary a	actor the principa	u, for the uses and pu	poses therein set f	orth	
Pated: 02 29 20 [	<i>!</i> _		- 11 D	$I P \lambda$	
(SEAL)	-			Notary Public	<u> </u>
(GEAL)		OFFICIAL SEAL			
	KUI	MARAN M VALASATHAN	. [		
TG FORM 4141	Notar	y Public - State of Itting	nie I		FOR USE IN: ALL STATES
ATG (REV. 2/13)	My Comm	nission Expires Jan 29,	2017	•	Page 1 of 2
	****		Attori	neys' Title Guara	nto Day 1 =
			19 11	yw o ou'i Cruara Canboe to o cons	my fund, Inc.
				Vacker Dr., STE	2400
			C 7 d	11 / 11/1/16-165	50
				caren Departmer	nt
				- L 111C	44

1614142043 Page: 2 of 3

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	My commission expires	lan 29, 2017
	WITNESS	
The undersigned witness certifies that	DAN WANG	, known to me to be the sam
person whose name is subscribed as principal to the f acknowledged signing and delivering the instrument as the forth. I believe him or her to be of sound mind and memory	oregoing power of attorney, appeared be	fore me and the notary public an
a. the attending physician or mental health service	provider or a relative of the physician or r	orovider:
<ul> <li>an owner, operator, or relative of an owner or operator.</li> </ul>	perator of a health care facility in which the	e principal is a patient or resident.
c. a parent, sibling, descendant, or any spouse of successor agent under the foregoing power of at	Fough monage -1111	
d. an agent or successor agent under the foregoing	power of attorney.	ou, mairiage, or adoption; or
Dated: 07/29/16	M	iffra
STATE OF Phosphase		Miness
COUNTY OFCOUNTY	ss	
I, the undersigned, a Notary Public in and for gaid County		nown to me to be the same person
whose name is subscribed to the foregoing instrument 23 signed, sealed, and delivered the said instrument as his/ter	and a second	
Given under my hand this day of Month	2616 / C	n 10 11 1
OFFICIAL SEAL KUMARAN M VALASATHAN Notary Public - State of Illinois My Commission Expires Jan 29, 2	My compaission expires:	Ton 29 7017
Huan Warg	()	
2693 LISA COUNT	O	
Northbrook, K 6	0062	Ś
Sayl		at and the agent's nowers: (iii) he
lote: Non-statutory property powers must: (i) be executed greated by at least one witness to the principal's signature:	d by the principal; (ii) designate the agen	at and the agent's powers; (iii) be
efore a notary public. (755 ILCS 45/3-3)	and (17) indicate that the principal has ac	knowledged his or her signature
egal Description of premises:		
200,		

1614142043 Page: 3 of 3



## ATTORNEYS' TITLE GUARANTY FUND, INC.

### **LEGAL DESCRIPTION**

Permanent Index Number: Property ID: 04-21-208-033-0000

Property Address:

2693 Lisa Ct. Northbrook, IL 60062

Legal Description:

Lot 93 in Willow Woods, being a Subdivision in the Northeast 1/4 of Section 21, Township 42 North, Range 12, East of the Third Principal Meridian, according to plat recorded April 3, 1970 as Document No. 21125655 in Cook County, Illinois.