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This document prepared by:)
)
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Doc#: 1616222232 Fee: \$42.00
 RHSP Fee: \$9.00 RPRF Fee: \$1.00
 Karen A. Yarbrough
 Cook County Recorder of Deeds
 Date: 06/10/2016 03:09 PM Pg: 1 of 3

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 (Parcel Identification Number)
25-05-314-007-0000

QUIT-CLAIM DEED

THE GRANTOR **Star Capital Consulting, Inc., an California Limited Liability Limited Partnership**, for valuable consideration of ten dollars (\$10.00), and other good and valuable consideration, cash in hand paid, the receipt and sufficiency of which is hereby acknowledged, does hereby convey and warrant unto **Renew Real Estate Investing, Inc.** with a current address of **3705 Cherry Hills Drive, Flossmoor, Illinois 60422**, hereinafter "Grantee", the following real estate, together with all improvements located thereon, lying in the County of Cook, State of Illinois, to-wit:

LOT 34 IN EDWIN J. NELSON'S SUBDIVISION OF BLOCK 18 IN ISAAC CROSBY AND OTHERS SUBDIVISION OF THAT PART OF THE SOUTH 1/2 OF SECTION 5, TOWNSHIP 37 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, LYING WESTERLY OF CHICAGO ROCK ISLAND AND PACIFIC RAILROAD IN COOK COUNTY, ILLINOIS.

COMMONLY KNOWN AS 9219 S. THROOP STREET, CHICAGO, ILLINOIS 60620

Hereby releasing and waiving all rights under and by virtue of the Homestead Laws of the State of Illinois.

Subject to all easements, rights-of-way and protective covenants of record, if any.

To have and to hold same unto Grantee, and unto Grantee's heirs and assigns forever, with all appurtenances thereunto belonging.


 COOK COUNTY RECORDER OF DEEDS

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WITNESS Grantor's hand this 21th day of **May, 2016**.

Tamara Eckenrod
Star Capital Consulting, Inc. by Tamara Eckenrod, as President

STATE OF ILLINOIS

COUNTY OF COOK

SEE ATTACHED

I, the undersigned, a Notary Public in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT ~~Tamara Eckenrod~~ personally known to me to be the same person(s) whose name is/are subscribed to the foregoing instrument, appeared before me this day in person, and acknowledged that he signed, sealed and delivered this instrument as his free and voluntary act, for the uses and purposes therein set forth, including the release and waiver of the right of homestead.



Given under my hand and notarial seal this _____ day of **May, 2016**.

Notary Public

REAL ESTATE TRANSFER TAX		10-Jun-2016
	CHICAGO:	487.50
	CTA:	195.00
	TOTAL:	682.50 *

25-05-314-007-0000 | 20160601616336 | 0-703-776-064

* Total does not include any applicable penalty or interest due.

REAL ESTATE TRANSFER TAX		10-Jun-2016
	COUNTY:	32.50
	ILLINOIS:	65.00
	TOTAL:	97.50

25-05-314-007-0000 | 20160601616336 | 1-089-086-784

MAIL TO AFTER RECORDING AND FUTURE PAYMENTS TO:

Renew Real Estate Investing, Inc.

3705 Cherry Hills Drive

Flossmoor, Illinois 60422

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189



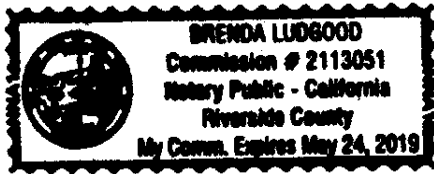
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
 County of Riverside)
 On May 27, 2016 before me, Brenda Ludgood, Notary Public,
Date Here Insert Name and Title of the Officer
 personally appeared Tamara Eckenrod
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is are subscribed to the within instrument and acknowledged to me that he she they executed the same in his her their authorized capacity(ies), and that by his her their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Brenda Ludgood
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Quit Claim Deed Document Date: 5/27/2016
 Number of Pages: 3 Signer(s) Other Than Named Above: N/A

Capacity(ies) Claimed by Signer(s)

Signer's Name: <u>Tamara Eckenrod</u>	Signer's Name: _____
<input type="checkbox"/> Corporate Officer — Title(s): _____	<input type="checkbox"/> Corporate Officer — Title(s): _____
<input type="checkbox"/> Partner — Limited General	<input type="checkbox"/> Partner — Limited General
<input checked="" type="checkbox"/> Individual Attorney in Fact	<input type="checkbox"/> Individual Attorney in Fact
<input type="checkbox"/> Trustee Guardian or Conservator	<input type="checkbox"/> Trustee Guardian or Conservator
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
Signer Is Representing: _____	Signer Is Representing: _____