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WARRANTY	DEED
GENERAL	

Doc#. 1634922029 Fee: \$52.00

Karen A. Yarbrough

Cook County Recorder of Deeds
Date: 12/14/2016 09:50 AM Pg: 1 of 3

Dec ID 20160801645331

ST/CO Stamp 1-106-258-112 ST Tax \$15.00 CO Tax \$7.50

THE GRANTOR(S),

Elm Street Homes, LLC, of the city of Chicago, County of Cook, Commonwealth of ILLINOIS, for and in consideration of Ten Dollars (\$10.00) in hand paid, remise(s), release(s), alien(s), and convey(s) to Magic Pro, LLC, the following described real estate situated in the County of Cook in the State of Illinois, to wit:

Lot 31 in Block 16 in Fiar Oak Unit No. 7, being a Subdivision in the West 1/2 of Section 23 Township 41 North Range 9 East of the Third Principal Meridian according to the Plat thereof recorded October 17, 1958 as Document 17349253, in Cook County Tinois.

And the Grantor(s), for itself, and its successors, does covenant, promise and agree, to and with the Grantee, its successors and assigns, that it has not done or suffered to be done, anything whereby the said premises hereby granted are, or may be, in any manner encumbered or charged, except as herein recited, and that the said premises against all persons lawfully claiming, or to claim the same, by, through or under it, it WILL WARRANT AND DEFEND, subject to the following:

SUBJECT TO:. covenants, conditions, and restrictions of record; public and utility easements; and to General Taxes for 2015 and subsequent years.

hereby releasing and waiving all rights under and by virtue of the homestead exemption laws of the State of Illinois.

Permanent Real Estate Index Number(s): 06-23-305-005-0000

Address of Real Estate: 9 E Pine Street, Streamwood, IL 60107 Dated this 15 day of August 45, 2016

Sudhekar Reddy

VILLAGE OF STREAMWOOD
REAL ESTATE TRANSFER TAX
NO. 101

STATE OF _______ SS

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I, the undersigned, a Notary Public in and for said County, in the State aforesaid, CERTIFY THAT

	foregoing instrument, and delivered the said including the release
Given under my hand and official seal, this day of, 20	
	_(Notary Public)
See NEXT PAGE	
PAGE	
Ox	
Prepared By: Segel Law Group, Inc., 1827 Walden Office Square, Suite 450, Schaumburg	IL 60173
Mail To: Machi Pro LIC PE Pine St Structure (DID)	
T'S C)
	Tico
Name and Address of Taxpayer/Address of Property:	
<u>S</u> Amel	

1634922029 Page: 3 of 3

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California All-Purpose Certifica	te of Acknowledgment
A notary public or other officer completing this certificate verifies of document to which this certificate is attached, and not the truthfull	
State of California	
County of LUS ANGELES	\$,\$.
On 08/15/2016 before me, EA AQ.	AQUE INSTARY PLOUS.
personally appeared SUDHA KA	L REDDV
	as to aspect (C
who proved to me or the basis of satisfactory evidence is/are subscribed to the within instrument and acknow the same in his/her/their authorized capacity(ies), and instrument the person(s), or the entity upon behalf of vinstrument.	ledged to me that he/she/they executed that by his/her/their signature(e) on the
I certify under PENALTY OF PER URY under the law of the State of California that the foregoing paragraph true and correct. WITNESS my hand and official seal. OPTIONAL INFORMAT	Seath-internation in the medical medic
Although the information in this section is not required by less is could this acknowledgment to an unauthorized document and may nerve us	pre-unit fractizient removel and inciteoringmior
Description of Attached Document	electric tricking output
The preceding Certificate of Acknowledgment is attached to a	Method of Signe. gentification
document titled/for the purpose of	Proved to me on the basis of satisfactory evidence:
WARRANTY DEED GENERAL	form(a) of identification [c e tiple witness(es)
Containing 2 pages, and dated 08/15/701 4	Notarial event is detailed in notary jour al (n;
The signer(s) capacity or authority is/are as: Individual(s) Attorney-in-fact Corporate Officer(s)	Page # Entry # Notary contact: Other Additional Signer Signer(s) Thumbprints(s)
☐ Guardian/Conservator ☐ Partner - Limited/General ☐ Trustee(s) ☐ Other:	
representing:	
	LNAULTHERIENT ACCIONACIONATION CONTROL PARTICIPATOR PARTI