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Karen A. Yarbrough

Cook County Recorder of Deeds Date: 05/01/2017 11:18 AM Pg: 1 of 9

ILLINOIS STATUTORY

SHORT FORM

ATI COUNTY CORTES OFFICE POWER OF ATTORNEY FOR PROPERTY

Prepared by Christopher S. Jordan 141 W Jackson Blvd, Suite 2720 Chicago, IL 60604

Mail to: Christopher S. Jordan 141 W Jackson Blvd, Suite 2720 Chicago, IL 60604

PIN 14-08-402-017-1003

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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 Fower 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.

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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.

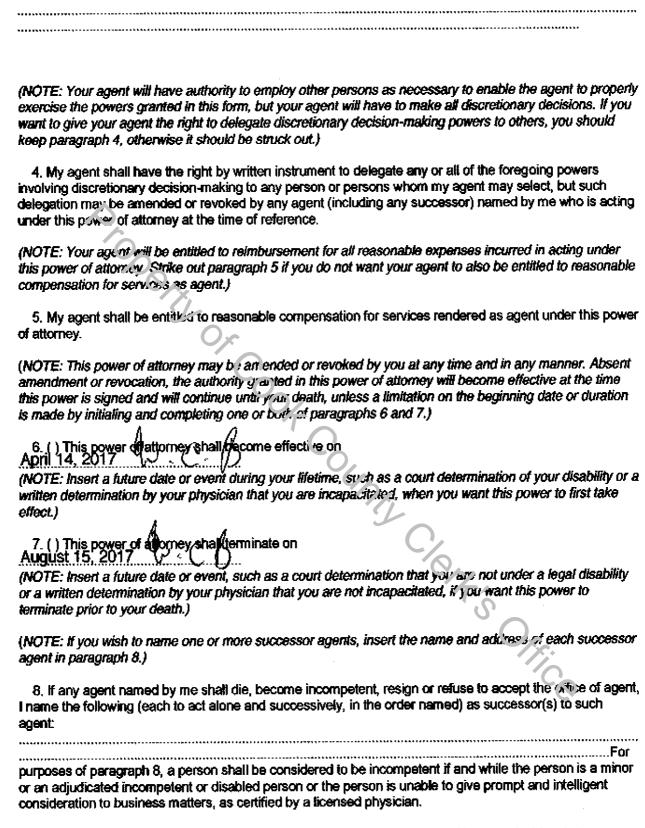
TODORNY OF COOK COUNTY CLORES OFFICE Please place your initials on the following line indicating that you have read this Notice:

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| DA BLOGO OTATI ITODIV OLIODT FORM |
|--|
| ILLINOIS STATUTORY SHORT FORM |
| / I POWER OF ATTORNEY FOR PROPERTY |
| Tiellia O Basc |
| 1 1 WI I I MA C I DOLOS (insert name |
| and address of principal) hereby revoke all prior powers of attorney for property executed by me and appoint. William A. Bass |
| (insert name and address of agent) |
| (NOTE: You may not name co-agents using this form.) |
| as my attorn and act (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 Law" (it iclinding 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. Failure to sirios 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.) |
| De granted to the agent. To sain a fut a category you must than a mis an angle are the annual and an area. |
| (a) Real estate transactions. |
| (a) Real estate transactions. (b) Financial institution transactions. |
| |
| (c) Stock and bond transactions. |
| (d) Tangible personal property transactions. |
| (e) Safe deposit box transactions. |
| (f) Insurance and annuity transactions. |
| (g) Retirement plan transactions. |
| (h) Social Security, employment and military service panefits. |
| (i) Tax matters. |
| (j) Claims and litigation. ———————————————————————————————————— |
| (k) Commodity and option transactions. |
| (I) Business operations. |
| (m) Borrowing transactions. |
| (n) Estate transactions |
| (o) All other property transactions. |
| 10 |
| (NOTE: Limitations on and additions to the agent'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 on 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.) |
| |
| *************************************** |
| 3111041117 |
| |
| |
| 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 limitation, power to make gifts, |
| |
| specifically referred to below.) |
| exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below. The power to execute all documents relating to the purchase of 5123 N Kenmore Ave, Ur |
| 5123 N Gamor Ave |
| |
| Unit 62. |
| 06ia - TH 60640 |
| $(V_{k}, A_{k+1}, V_{k}) \mapsto (V_{k}, A_{k+1},$ |

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(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.)

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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.

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 STATE TENNESSEE Dated: .. NOTARY PUBLIC OSON COU (principal) My Commission Expires 03/06/2018 (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 ior in below. The notary may not also sign as a witness.) known to me to be the The undersigned witness certifies that: same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and acknowledged signify 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 foregoing povict of attorney. Dated: 4-19-2017 (NOTE: Illinois requires only one witness, but other jurisdictions may require more than 🛵 witness. If you wish to have a second witness, have him or her certify and sign here:) (Second witness) The undersigned witness certifies that known to be the same person whose same 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 previder, (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 power of attorney.

Witness

Dated: ...

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| State of) | |
|---|---|
| county of Summer) ss. | |
| The undersigned, a notary public in and for the above the MAND C. BASS, known to me to be the same the foregoing power of attorney, appeared before me a second second condition and the free and voluntary act of the principal, for the use the correctness of the signature(s) of the agent(s)). | re person whose name is subscribed as principal to and the witness(es) E.A. S.TANSIACHNA |
| Dated: 44617 My commission axo res 03 04 2018 | Notary Pu |
| (NOTE: You may, but are not required to, request your signatures below. If you inchide specimen signatures it certification opposite the signatures of the agents.) | r agent and successor agents to provide specimen n this power of attorney, you must complete the |
| Specimen signatures of agent (and successors) | I certify that the signatures of my agent (and successors) are genuine. |
| (agent) | (principal) (principal) |
| (successor agent) | (principal) |
| (successor agent) | (principal) |
| (NOTE: The name, address, and phone number of the principal in completing this form should be ins | erted below.) |
| Name: Christopher S. Jordan 141 W Jackson | |
| Address: Suite 2720 | Co |
| Chicago, IL 60604 | |
| 312-561-5063 | |

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"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:

(1) do what you know the principal reasonably expects you to do with the principal's property;

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

(3) keep a complete and detailed record of all receipts, disbursements, 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) reor erate 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 the create a conflict of interest that is inconsistent with the other principles in this Notice to

Agent;

do any act beyand the authority granted in this power of attorney;

(3) commingle the mincipal's funds with your funds;

(4) borrow funds or other property from the principal, unless otherwise authorized;

(5) continue acting on beraff 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, journust use those special skills and expertise when acting for the principal. You must disclose your identity as 2) 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 prover of attorney for property document.

If you violate your duties as agent or act outside the automity 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 wild do not understand, you should seek legal ot Office advice from an attorney."

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Exhibit A - Legal Description

Unit Number 02 in the 5121-5123 North Kenmore Avenue Condominium, as delineated on a survey of the following described real estate:

Lot 3 in Block 3 in Argyle Subdivision, a Subdivision of Lots 1 and 2 of Fussey and Fennimore's Subdivision of the Southeast Fractional 1/4 and Lots 1 and 2 of Colehour and Conarroe's Subdivision of Lot 3 in Fussey and Fennimore's Subdivision Section 8, Township 40 North, Range 14 East of the Third Principal Meridian, In Cook County, Illinois:

Which Survey is attached as exhibit "B" to Declaration of Condominium recorded August 21, 2007 as Document 0723315044, as may be amended from time to time; together with its undivided percentage interest in the common elements in Cook County Illinois.

5123 N Kenmore Avenue, Condo G2, Chicago, Illinois 60640 Permanent Index r'uniber: 14-08-402-017-1003

e, C.
per: 14-c.

Cook County Clark's Office