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Doc#. 1712108096 Fee: \$52.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 05/01/2017 12:45 PM Pg: 1 of 3

Dec ID 20170401640252
ST/CO Stamp 1-443-196-608 ST Tax \$40.00 CO Tax \$20.00

SPECIAL WARRANTY DEED

Housing Opportunity Partners REO LLC ("Grantor") in consideration of \$10.00 and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, does hereby convey and quit claim to **Juana Munoz**, ("Grantee") the following described real estate in Cook, Illinois:

LOT 2 IN OWNERS DIVISION OF (EXCEPT THE SOUTH 175 FEET THEREOF) IN BLOCK 5 IN EDGEWOOD PARK ANNEX OF SECTION 20, TOWNSHIP 35 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

P.L.N. # 32-20-104-021-0000

Property Commonly Known As: 1009 Campbell Avenue, Chicago Heights, IL, 60411

Grantor warrants to the Grantees and Grantee's heirs and assigns that it has not done or suffered to be done anything to the property during Grantor's ownership thereof or in any manner encumbered the property except as expressly set forth in this deed and further covenants and warrants that it will defend the property against all persons asserting claims through Grantor contrary to the foregoing limited warranty. ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, ARE HEREBY EXPRESSLY DISCLAIMED. THIS CONVEYANCE OF REAL ESTATE AND IMPROVEMENTS THEREON IS MADE "AS-IS", WITHOUT REPRESENTATION OR WARRANTY OF ANY KIND EXCEPT THE WARRANTY OF TITLE EXPRESSLY PROVIDED HEREIN.

Dated: 3-28, 2017

Housing Opportunity Partners REO LLC

By: [Signature]

Its: portfolio manager

This document prepared by:
Khuever & Platt, LLC
65 E. Wacker Place, Suite 2300
Chicago, IL 60601

Mail subsequent tax bills to and after recording
~~attention:~~ Juana Munoz
1009 Campbell Ave
Chicago Heights, IL
60411

CT REO-16 REO 501357LP-242-MU

16040107

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STATE OF _____)
) SS:
COUNTY OF _____)

see attached

I, _____, Notary Public, in and for the County and State aforesaid, DO HEREBY CERTIFY, that _____ personally known to me to the _____ of Housing Opportunity Partners REO, LLC, and personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and severally acknowledged that as such _____, he/she signed and delivered the said instrument and caused the corporate seal of said corporation to be affixed thereto, pursuant to authority given by the Board of Directors of said corporation, as his/her free and voluntary act, and as the free and voluntary act and deed of said corporation, for uses and purposes therein set forth.

Given under my hand and official seal this _____ day of _____, 2017.

Notary Public

My Commission Expires: _____

Mail to after recording

Albin Sporny III

Po. Box 1048

Mokena, IL 60448

Property of Cook County Clerk's Office

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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 San Francisco)
 On 3/28/17 before me, Koy Terada, Notary Public
Date Here Insert Name and Title of the Officer
 personally appeared Hon Amyung
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 [Handwritten Signature]
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: _____ Document Date: _____
 Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

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