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Doc#: 1712517062 Fee: \$56.00
Karen A. Yarbrough
Cook County Recorder of Deeds
Date: 05/05/2017 11:32 AM Pg: 1 of 5

POWER OF ATTORNEY

KNOW ALL MEN by these presents,


That I, Robert Hyungki Choi, County of Cook, State of Illinois, hereby appoint Susan J. Kim or any attorney from the firm of Drost Kivlahan McMahon and O'Connor LLC, of the County of Cook, State of Illinois, as the attorney for me and in my name and on my behalf to act

as my attorney and representative at the real estate closing for property located at 2275 Westview Drive, Des Plaines, IL 60018, Illinois. I authorize and grant unto them all powers needed to close the sale or refinance transaction of the above property. I authorize them to have the same power and authority as I would have if I were present at closing.

Dated: 11/11/16 Signed 
Robert Hyungki Choi

(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 form below. The notary may not also sign as a witness.)

The undersigned witness certifies that, Robert Hyungki Choi, known to me to be the same person whose name 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 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 a resident; (c) a parent, sibling, descendant, or any spouse of such parent, sibling, or descendants 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; (d) an agent or successor agent under the foregoing power of attorney.

Dated: 11/11/16 Signed 
Witness

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State of Illinois)
) SS.
County of Cook)

The undersigned, a notary public in and for the above county and state, certifies that Robert Hyungki Choi, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the witness Angela Seicean in person, and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth, and certified to the correctness of the signature(s) of the agent(s).

Dated: 11/10/16.

Dawn M Gerlach
Notary Public

My commission expires _____

Prepared by and return to: Drost Kivlahan McMahon & O'Connor LLC 11 South Dunton Avenue,
Arlington Heights, Illinois 60005



Prepared by
SUSAN J Kim
21660 W Field Parkway
118
Deer Park IL 60010

Return to
Junh JA Choi
35453 High Ranch
Springfield OR 97478

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Agent's Certification and Acceptance of Authority Form 7/1/11

(Text of Section after amendment by P.A. 96-1195)

Sec. 2-8. Reliance on document purporting to establish an agency.

(a) Any person who acts in good faith reliance on a copy of a document purporting to establish an agency will be fully protected and released to the same extent as though the reliant had dealt directly with the named principal as a fully-competent person. The named agent shall furnish an affidavit or Agent's Certification and Acceptance of Authority to the reliant on demand stating that the instrument relied on is a true copy of the agency and that, to the best of the named agent's knowledge, the named principal is alive and the relevant powers of the named agent have not been altered or terminated; but good faith reliance on a document purporting to establish an agency will protect the reliant without the affidavit or Agent's Certification and Acceptance of Authority.

(b) Upon request, the named agent in a power of attorney shall furnish an Agent's Certification and Acceptance of Authority to the reliant in substantially the following form:

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AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY

I, **Robert Hyunki Choi** (insert name of agent), certify that the attached is a true copy of a power of attorney naming the undersigned as agent or successor agent for **Byung Hyun Choi** (insert name of principal).

I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.

I accept appointment as agent under this power of attorney.

This certification and acceptance is made under penalty of perjury.*

Dated: November 10, 2016

.....
Agent's Signature)

Robert Hyunki Choi
.....
Print Agent's Name)

.. 35657.. HIGH RANCH.. SPRINGFIELD, OR 97474..
(Agent's Address)

*(NOTE: Perjury is defined in Section 32-2 of the Criminal Code of 1961, and is a Class 3 felony.)

(c) Any person dealing with an agent named in a copy of a document purporting to establish an agency may presume, in the absence of actual knowledge to the contrary, that the document purporting to establish the agency was validly executed, that the agency was validly established, that the named principal was competent at the time of execution, and that, at the time of reliance, the named principal is alive, the agency was validly established and has not terminated or been amended, the relevant powers of the named agent were properly and validly granted and have not terminated or been amended, and the acts of the named agent conform to the standards of this Act. No person relying on a copy of a document purporting to establish an agency shall be required to see to the application of any property delivered to or controlled by the named agent or to question the authority of the named agent.

(d) Each person to whom a direction by the named agent in accordance with the terms of the copy of the document purporting to establish an agency is communicated shall comply with that direction, and any person who fails to comply arbitrarily or without reasonable cause shall be subject to civil liability for any damages resulting from noncompliance. A health care provider who complies with Section 4-7 shall not be deemed to have acted arbitrarily or without reasonable cause.
(Source: P.A. 96-1195, eff. 7-1-11.)

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CHICAGO TITLE
COMPANY

LEGAL DESCRIPTION

Order No.: 17NW7126652RM

For APN/Parcel ID(s): 09-29-302-126-0000

THE WESTERLY 220 FEET OF THE EASTERLY 1110 FEET OF THE SOUTHERLY 50 FEET OF THE NORTHERLY 500 FEET OF THE SOUTH WEST 1/4 OF THE SOUTH WEST 1/4 OF SECTION 29, TOWNSHIP 41 NORTH, RANGE 12 EAST OF THE THIRD PRINCIPAL MERIDIAN, ALL OF THE AFORESAID MEASUREMENTS BEING DRAWN ON LINES PARALLEL TO THE NORTHERLY AND EASTERLY LINES OF THE SOUTH WEST 1/4 OF THE SOUTH WEST 1/4 OF SECTION 29, IN COOK COUNTY, ILLINOIS.

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