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Cook County Recorder of Deeds
Date: 07/10/2017 01:14 PM Pg: 1 of 5

Karen A. Yarbrough

Prepared By:

JOHN L JANCZUR, ESQ KOKOSZKA & JANCZUR, PC 19 SOUTH LA SALLE ST, STE 1201 CHICAGO, IL 60603

Return To:

JOHN L JANCZUR, ESQ KOKOSZKA & JANCZUR, PC 19 SOUTH LA SALLE ST, STE 1201 CHICAGO, IL 60603

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CAMBRIDGE TITLE COMPANY 3100 Dundee Road, Suite 906 Northbrook, IL 60062 #LINOIS STATUTORY SHORT FORM FOWER OF ATTORNEY FOR PROPERTY

LEGAL DESCRIPTION

PARCEL 1: UNIT 2E IN 3561 WEST LYNDALE CONDOMINIUMS AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE: LOTS 202 AND 203 IN THE SUBDIVISION OF THE NORTH 1/2 OF THE WEST 1/3 OF THE NORTHEAST 1/4 OF SECTION 35, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, WHICH SURVEY IS ATTACHED AS EXHIBIT "D" TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NO. 0328144164, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, IN COOK COUNTY, ILLINOIS.

PARCEL 2: THE EXCLUSIVE RIGHT TO THE USE OF P-6, A LIMITED COMMON ELEMENT, AS DELINEATED ON THE SURVEY ATTACHED TO THE DECLARATION OF CONDOMINIUM AFOR! CAID.

Commonly known as: 3561 W LYNDALE ST, UNIT 2E, CHICAGO, IL 60647

Permanent Index No.: 13-35-212-025-1006

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

Power of Attorney made this 13th day of June, 2017

1. I, Peter Heller, of Cupertino, California hereby appoint: Gregory Heller of Chicago, Illinois as my attorney-in-fact (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" (including all amendments), but subject to any limitations on or additions to the specified powers inserted in paragraph 2 or 3 below:

Real estate transactions including but not limited to, the purchase and financing of the property commonly known as Unit 2E; 3561 W. Lyndale Street, Chicago, Illinois 60647. The property legal description is described on Exhibit A attached hereto and made a part hereof.

The powers granted above shall not include the following powers or shall be modified or limited in the fallowing particulars (here you may include any specific limitations you deem appropriate, such as a prohibitual or conditions on the sale of particular stock or real estate or special rules on borrowing by the agent):

NONE.

3. In addition to the powers granted above, I grant my agent the following powers (here you may add any other delegable powers including, without limitation, power to make gifts, exercise power of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below):

ANY AND ALL DELEGABLE POWERS ARE INCLUDED.

- 4. My agent shall have the right by writer instrument to delegate any or all of the foregoing powers involving discretionary decision-making to any person or persons whom my agent may select, but such delegation may be amended or revoked by any agent (including any successor) named by me who is acting under this power of attorney at the time of reference.
- 5. My agent shall not be entitled to reasonable compet sation for services rendered as agent under this power of attorney.
 - 6. () This power of attorney shall become effective upon execution.
 - 7. () This power of attorney shall terminate on July 30, 2017.
- 8. If any agent named by me shall die, become incompetent, resign or refuse to accept the office of agent, I name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

For purposes of this paragraph 8, a person shall be considered to be incompetent if and while the person is a minor or an adjudicated incompetent or disabled person or the person is unable to give prompt and intelligent consideration to business matters, as certified by a licensed physician.

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.

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10. I am fully informed as to all the corgrant of powers to my agent.	ntents of this form and und	ierstand the ful	=	_12
	Signed Principal Peter	Heller	22-JUNE	-17
Specimen signatures of agent (and successors)	I certify that the signatur (and successors) are corr		: • •	
Agent	Principal	<u>;</u>	· ·	
State of (MIFIAN, IA) County of SANA CLARA) SS.				
The undersigned, a notary public in and for known to me to be the same person whose name is sufappeared before me and the additional witness in instrument as his/her free and voluntary act for the us Dated: 21-JVNE-17-	bscribed as principal to the person and acknowledge	e foregoing poved signing and	ver of attorney,	
SEE A CT/.CME CALIFCENIA NOTARIZATIO	Notary Notary Notary Notary	y Public		
The undersigned witness certifies that Peter is subscribed as principal to the foregoing power of a acknowledged signing and delivering the instrument uses and purposes therein set forth. I believe him/h witness also certifies that the witness is not: (a) the a relative of the physician or provider; (b) an owner, o care facility in which the principal is a patient or resisuch parent, sibling, or descendant of either the principower of attorney, whether such relationship is by bleagent under the foregoing power of attorney. Dated: 22 June 2017 (SEAL) Witness This document was prepared by: John L. Janczur, Esq. KOKOSZKA & JANCZUR, P.C.	Heler known to me to be attorne, ar peared before t as the free at a voluntary are to be of sound mind are stending physician c. in experator, or relative of an ident; (c) a parent, sibling, ipal or any agent of succession, marriage, or adoption	the same person me and the not by act of the print of the	tary public and incipal, for the ne undersigned ice provider or ator of a health r any spouse of or the foregoing	

19 South LaSalle Street, Suite 1201

Chicago, IL 60603

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10. I am fully informed as to all the congrant of powers to my agent.	Signed Principal Feter Heller
Specimen signatures of agent (and successors)	I certify that the signatures of my agent (and successors) are correct
Agent	Principal
known to me to be the same person whose name is sub	the above county and state, certifies that Peter Heller, oscribed as principal to the foregoing power of attorney,
instrument as his/her free and countary act for the us	person and acknowledged signing and delivering the ses and purposes therein set forth.
Dated: 21-JVNE-17	
SETATTACHE CALLORNIA NOTAFIZATIO	Notary Public My commission expires
is subscribed as principal to the foregoing power of a acknowledged signing and delivering the instrument uses and purposes therein set forth. I believe him/h witness also certifies that the witness is not: (a) the a relative of the physician or provider; (b) an owner, care facility in which the principal is a patient or resistuch parent, sibling, or descendant of either the principal is a patient or the principal is a patient or resistuch parent, sibling, or descendant of either the principal is a patient or resistant parent, sibling, or descendant of either the principal is a patient or resistant parent, sibling, or descendant of either the principal is a patient or resistant parent, sibling, or descendant of either the principal is a patient or resistant parent, sibling, or descendant of either the principal is a patient or resistant parent	Heller known to me to be the same person whose name atterney appeared before me and the notary public and the as the fier and voluntary act of the principal, for the error be of sound mind and memory. The undersigned attending physicial or mental health service provider or operator, or relative of an owner or operator of a health ident; (c) a parent, slowing, descendant, or any spouse of ipal or any agent of successor agent under the foregoing ood, marriage, or adoption, or (d) an agent or successor
Witness we was prepared by: John L. Janczur, Esq. KOKOSZKA & JANCZUR, P.C. 19 South LaSalle Street, Suite 1201	

Chicago, IL 60603

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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	
State of California	
County of Santa Clara	
On 32 JUNE 3017 before me, Kirti F	Patel, Notary Public, personally appeared
who proved to me on the basis of satisfactory of	evidence to be the person(/) whose name(/)
is/afe subscribed to the within instrument and acknowl	edged to me that he/she/they executed the same
in his/her/their archorized capacity(ics), and that by I	
person(s), or the entity upon behalf of which the	he person(s) acted, executed the instrument
I certify under Penalty of Perjury under the laws of the	
is true and correct.	
WITNESS MY HAND AND OFFICIAL SEA	A.I
	KIRTI PATEL NOTARY PUBLIC - CALIFORNIA COMMISSION # 2178864 E SANTA CLARA COUNTY My Comm. Exp. January 27, 2021
Signature of Notary Public	(Notary Seal)
OPTIONAL INFO	ORWITION
The acknowledgment contained within this document is in accordant performed within the State of California shall use the preceding words ment cannot be affixed to a document sent by mail or other means, whereby the signer did not personally appear before notary public. In addition, the correct notarial wording can be affixed to a document without the contained within the contained within this document is in accordant performed within this document is in accordant performed within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within this document is in accordant performed within the State of California shall use the preceding words are contained within the State of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use the preceding words are contained within the state of California shall use th	ing pursuant to C'n! Code section 1189. An acknowledg rwise delivered to a neary public, including electronic e the notary public, evan if the signer is known by the only be signed and sealed by a notary public. The sea
DESCRIPTION OF ATTACHED DOCUMENT	CAPACITY CLAIMED BY SIGNER
	CAPACITY CLAIMED BY SIGNER Individual
SHART FAM DEWER OF ATTOLITY (Title of document)	
	Individual Corporate Officer Partner
SHART FAM DEWER OF ATTOLITY (Title of document)	IndividualCorporate Officer

MMXV H.WARDALE 925.786.8909 www.TotallyNotary.net