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Doc#. 1800215085 Fee: \$56.00 Karen A.Yarbrough Cook County Recorder of Deeds Date: 01/02/2018 01:42 PM Pg: 1 of 5

STATE OF ILLINOIS)

COUNTY OF (S

\$5.

Return to:

1530 E. Dundee Rd. Ste. 250 Palatine, IL 60074 213

41893

POWER OF ATTORNEY

I, AMT LTD, do hereby appoint, ERIC LTU (herein called "my attorney"), a sample of whose signature appears below, my true and lawful agent and attorney, for me in my name to execute all documents necessary to purchase certain real property located at 261 Birch Street, Winnetka, cook County, Illinois 60093, giving and granting to my said attorney full power and authority to execute and deliver all written documents relating to said real property, including, but not limited to, real estate sales contracts, deeds, mortgages, notes, settlement statements and any other closing documents, and to do any and all acts necessary and proper to be done in and about the premises.

The powers and authorities granted herein shall not be affected, impaired or exhausted by any non-exercise thereof or by any one or more exercises thereof. My attorney shall exercise or fail to exercise the powers and authorities granted herein in each case as my attorney, in my attorney's own absolute discretion, deems desirable or appropriate under existing circumstances. I hereby ratify and confirm as good and effectual, at law or in equity, all that my attorney, and any agents and attorneys appointed by my attorney, and his/her agents, associates and

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substitutes, may do by virtue hereof. However, despite the above provisions, nothing herein shall be construed as imposing a duty on my attorney to act or assume responsibility for any matters referred to above or other matters, even though my attorney may have power or authority hereunder to do so.

If ary power or authority hereby sought to be conferred upon my attorney should be invalid or unexercisable for any cause or not recognized by any person or organization dealing with my attorney, the remaining powers and authorities given to my attorney hereunder shall revertheless continue in full force and effect.

This power of attorney shall remain in full force for a period of one (1) year following the execution of this instrument and shall not be affected by my incompetence, incapacity or disability, it being my intent that the power granted herein shall continue without interruption until my death unless previously revoked by me. Any person dealing with my attorney may rely without inquiry upon the certification of my attorney that this power of attorney has not been revoked.

I expressly agree that all acts done hereunder by my attorney, prior to the receipt by my attorney or any parties with whom my attorney has dealt pursuant to this power of attorney, of actual notice of revocation of this authority, whether by my death or otherwise, shall be binding upon me and upon my respective heirs and legal representatives.

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No person relying upon this power of attorney in good faith and without actual notice of revocation of this authority shall incur any liability to me or to my estate as a result of permitting my attorney to exercise any power or discretion on my behalf granted herein, nor shall any person dealing with my attorney be required to see to the application and disposition of any moneys, specks, bonds, securities or other property paid to or delivered to my attorney, or my attorney's substitute, pursuant to the provisions hereof.

This power of attorney shall be governed by the laws of the State of Illinois.

Reproductions of this executed original (with reproduced signatures and the certificate of acmowledgment) shall be deemed to be original counterparts of this power of attorney.

			14.
ERIC	LIUZ		00
•	IN WITNESS WHEREOF, I he	reby certify to	the genuineness of
the s	signature of my attorney a	and have signed	this power of
attor	rney on the 11 day of	November	2017
		ANL	of.
*		AMI LIU	

Representative signature of my attorney:

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STATE OF	ILLINOIS	Ì	
	Λ)	SS
COUNTY O	IL DOK)	

I, the undersigned authority, a Notary Public in and for said County, in said State, hereby certify that AMT LIU, whose name is subscribed to the foregoing instrument, and who is known to me, acknowledged before me on this day that being informed of the contents of the foregoing instrument, she signed this instrument as her free and voluntary act on the day the same bears date, for the uses and purposes therein set forth.

Given under my hard and official seal, this 144 day of

November	2017
714 1 4100 0 1	

Action Monos
Notary Public

My Commission Expires:

4/1/2018

GESICIAL SEAL
CARRYE D THOMAS
Notary Public State of Illinois
My Commission Expires Apr 1, 2018

THIS INSTRUMENT WAS PREPARED BY:

Drake James Leoris, Jr. LEORIS & COHEN, P.C. 622 Laurel Avenue Highland Park, IL 60035 847/433-6063

Amiliu.POA/1

IN MAYER'S CONSOLIDATION OF PARTY TO WINNETKA, A SUBDIVISION OF PARTY TO WINNETKA, A SUBDIVISION OF PARTY THE THIRD PRING.

PIN: 05-20-404-022-0000

Legal Description PT17-41893/55