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Edward M. Moody

Cook County Recorder of Deeds
Date: 07/14/2020 04:10 PM Pg: 1 of 8

This page is a good to provide adequate space for recording information and microfilming.

Do not remove this page as it is now part of the document.

PREPARE BY AND RETURN THIS DOCUMENT TO:

Manuel A Cardinas 2059 N. Wostern Auc Chicago, 11 60647

Junit Clort's Office

2019620300 Page: 2 of 8

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DOOP OF ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

Prepared by:

Manuel A. Cardenas

2059 North Western A e Chicago, IL 60647 County Clarks Office

773 227 6858

Mail to:

Miguel Diaz Jr.

111 West Devon Street

Roselle, Illinois

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 Power 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 coagents.

This form does not impose a duty upon your agent to handle your financial attairs, 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

2019620300 Page: 3 of 8

agent must keep a record of all receipts,

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 attorneyatlaw 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.

The powers you give your agent are explained more fully in Section 34 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.

Please place your initials on the following line indicating that you have read this Notice:

ILUNOIS STATUTORY SHORT FORM FOWER OF ATTORNEY FOR PROPERTY

1.1, Miguel Diaz Jr., of 111 West Dev in S reet, Roselle, Illinois hereby revoke all prior powers of attorney for property executed by me and appoint: Francisco J. Gutierrez Garcia of 13314 Scath Burley Ave., Chicago Illinois

(NOTE: You may not name coagentr using this form.) as my attorneyinfact (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 34 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:

(NOTE: You must strike out any one or more of the following categories of puwers you do not want your agent to have. Failure to strike the title of any category will cause the powers describe in that category to refor be granted to the agent. To strike out a category you must draw a line through the tille of the category.)

- (a) Real estate transactions.
- (b) Tax matters.
 - (c) Claims and litigation.
- (d) Business operations.
- (e) Estate transactions.
- (f) All other property transactions,

(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 or limits 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 horrowing by the agent.) To execute any and all documents necessary for the purchase of: 22602 Spencer Avenue, Sauk Village, Illinois 60411	phibition or agent) enue, Sauk	
The state of the s		
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 exercise powers of appointment, name or change beneficiaries or joint tenants or revoke or amend any trust specifically referred to below.) N/A	ì,	
Tomorio de serio de la comercia del la comercia del la comercia de la comercia del la	٠.,,	
and a second contract of the c		

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(NOTE: Your agent will have authority to employ other persons as necessary to enable the agent to properly exercise the powers granted in this form, but your agent will have to make all discretionary decisions. If you want to give your agent the right to delegate discretionary decisionmaking powers to others, you should keep paragraph 4, otherwise it should be struck out.)

4. My agent shall have the right by written instrument to delegate any or all of the foregoing powers involving discretionary decisionmaking 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.

(NOTE: Your agent will be entitled to reimbursement for all reasonable expenses incurred in acting under this power of attorney. Strike out paragraph 5 if you do not want your agent to also be entitled to reasonable compensation for services as agent.)

5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of ε ton ey.

(NOTE: This power of attorney may be amended or revoked by you at any time and in any manner. Absent amendment of revocation, the authority granted in this power of attorney will become effective at the time this power is a first ed and will continue until your death, unless a limitation on the beginning date or duration is made by initially g and completing one or both of paragraphs 6 and 7.)

6. (X) This power of attorney shall become effective on May 27, 2020

(NOTE: Insert a future date or event during your lifetime, such as a court determination of your disability or a written determination by your physician that you are incapacitated, when you want this power to first take effect.)

7. (X) This power of attorney shall terminure on closing date of : 22602 Spencer Avenue, Sauk Village II. 60411

(NOTE: Insert a future date or event, such as a court determination that you are not under a legal disability or a written determination by your physician that you are not incapacitated, if you want this power to terminate prior to your death.)

(NOTE: If you wish to name one or more successor agents, insert the name and address of each successor agent in paragraph 8.)

8. If any agent named by me shall die, become incompetent, resign or refrise 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:

Manuel A. Cardenas, 2059 North Western Avenue, Chicago, Illinois 60647

For purposes of 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.

(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.)

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 attorneyatlaw or

1A 32 Magrice law in illusors 1 to 1915 midud vigitor has not been to incorporated by reference and included as part of this form: 13 10/25/31/2019 May 27, 2020 14

A SECTION OF THE PROPERTY.

Miduel Diaz Jr

2019620300 Page: 5 of 8

(NOTE: This power of allomey will not be effective unless it is signed by at least one witness and you. signature is notarized, using the form below. The notary may not also sign as a witness.)

The undersigned witness certifies that 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 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: 9/(d) an agent or successor agent under the foregoing power of attorney.

Dated: May 27, 2020

(NOTE: Illinois requires cally one witness, but other jurisdictions may require more than one witness. If you wish to have a second y the ss, have him or her certify and sign here:)

(Second witness) The undersigned views certifies that Miguel Diaz Jr. 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 purpost at therein set forth. I believe him or her to be of sound mind and memory. The undersigned witness also certilies that the witness is not: (a) the attending physician or mental health service provider or a relative of the physican 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, it descendant of either the principal or any agent or successor agent under the foregoing power of auc ne , whether such relationship is by blood, marriage, or adoption; or (d) an agent or successor agent under the foregoing power of attorney.

Dated: May 27, 2020

State of Illinuis) \$8. County of Cook

John Office The undersigned, a notary public in and for the above county and state, certifies that Miguel Diaz Jr. Tulleta (navale) 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: May 27 2020

My commission expires 10 /9/23

NORMA A RIVAS OFFICIAL SEAL Notery Public - State of Illinois My Commission Expires October 09, 2023

(NOTE) You may, but are not required to, request your agent and successor agents to provide specimen signatures below. If you include specimen signatures in this power of attorney, you must complete the certification opposite the signatures of the agents.)

2019620300 Page: 6 of 8

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gent (and successors)	of my agent (and successor
·)	are continu
	are genulne.
(C) NOTE OF THE OFFICE	and the latest of the latest o
(manual)	(principal)
(agent)	(5,00,6,00)
in an annual state of the state	\$2(\$2,732,00),\$3.10)(\$17,71111,\$17,100,000,000)
(successor agent)	(principal)
DESCRIPTION OF THE PROPERTY OF	ALADADAB (MAMBANTALIA INTERNALIA
(successor agent)	(principal)

(NOTE: The name, adure's, and phone number of the person preparing this form or who assisted the principal in completing this form should be inserted below.)

Manuel A. Chrienas

2059 N. Western Ave. Chicago, IL 60647

773. 227-6858

Chic Cook Colling Clarks

Town as Office 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
- (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) cooperate 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 to create a conflict of interest that is inconsistent with the other principles in this Notice to Agent;
 - (2) do any act beyond the authority granted in this power of attorney,
 - (3) commingle the principal's funds with your funds;
 - 4) borrow funds or other property from the principal, unless otherwise authorized: (5) continue acting on behalf 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

2019620300 Page: 7 of 8

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principal, your legal separation from the principal, or the dissolution of your marriage to the principal.

tryou have special skills or expertise, you must use those special skills and expertise when acting for the principal. You must disclose your identity as an 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:

" by as Agent"

The meaning of the powers granted to you is contained in Section 34 of the Illinois Power of Attorney Act, which is incorporated by reference into the body of the power of attorney for property document. If you violate your duties as agent or act outside the authority granted to you, you may be liable for any damages, including attorney's fees and costs, caused by your violation.

ng about , attorney."

Cooperation of Country Clork's Office If there is anything about this document or your duties that you do not understand, you should seek legal advice from an attorney."

2019620300 Page: 8 of 8

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EXHIBIT A

Order No.: OC20013890

For APN/Parcel ID(s): 33-31-109-012-0000 For Tax Map ID(s): 33-31-109-012-0000

LOT 9223 IN INDIAN HILL SUBDIVISION UNITE NUMBER 9, BEING A SUBDIVISION OF THE EAST 1/2 OF THE NORTHWEST 114 OF SECTION 31 TOWNSHIP 35 NORTH, RANGE 15, EAST OF THE WERIL NORTH, . S. O. COOK COUNTY CLOSELY SO OFFICE THIRD PRINCIPAL MERIDIAN ALSO THE NORTHWEST 1/4 OF THE NORTHEAST 1/4 OF SECTION 31, TOWNSHIP 35 NORTH, RANGE 15, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK

COUNTY, ILLING'S