Doc#. 2023021159 Fee: \$98.00

Edward M. Moody

Cook County Recorder of Deeds
Date: 08/17/2020 01:14 PM Pg: 1 of 8

My Clory's Office.

RECORDING COVER SHEET

2002384IL ANANTHARAM POA 2

Submitted for Recording by:

Rayenswood Title Com

Ravenswood Title Company, LLC 401 S. Lasalle Street, Suite 1502 Chicago, IL 60605

When Recorded Return To:

Ravenswood Title Company, LLC 401 S. Lasalle Street, Suite 1502 Chicago, IL 60605

Illinois Power of Attorney for Illinois Property EST. 7/1/11

1. NOTICE TO THE INDIVIDUAL SIGNING THE ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

PLEASE RHAD 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 snything about this form that you do not understand, you should ask a lawyer to explain it to you.

The propose of this Power of Attorney is to give your designated "agent" broad powers to handle your financial affilias, which may include the power to pladge, 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 Porm, you may name successor agents, but you may not name co-agents.

This form does are to pose a duty upon your agent to handle your financial affairs, so it is important that you select an agent who will have to this for you. It is also important to select an agent whom you trust, since you are giving that agent control or a your financial anets and property. Any agent who does act for you has a duty to act in good faith for your benefit to use due care, competence, and diligence. He or she must also act in accordance with the law and with the direction in this form. Your agent must keep a record of all receipts, disbursements, and significant actions taken as your to a

Unless you specifically limit the period of these that this Power of Attorney will be in effect, your agent may exercise the powers given to him or her throughout you lifetime, both before and after you become incapacitated. A court, however, can take away the powers of your wish it finds that the agent is not acting properly. You may also revoke this Power of Altorney if you wish.

This Power of Attorney does not authorize your agent to appe or in court for you as an attorney-at-law or otherwise to engage in the practice of law unless he or she is a licensed setumory who is authorized to practice law in Illinois.

The powers you give your agent are explained more fully in Section 2-4 of the Illinois Power of Attorney Act. This form is a part of that law. The "NOTE" paragraphs throughout \$\tilde{\pi} \geq \text{paragraphs} are instructions.

You are not required to sign this Power of Attorney, but it will not take eff of 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.

750 OFFICO

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

Principal's initials (Borrower(s))

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2. ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

| | The space above for factories the Only |
|--------------------|--|
| Street address: | Attorney is being created for the purpose of Refinance(drop down choice) of the property located at: 1260 W WASHINGTON BLVD APT 608 |
| City Chicago | 5 State L Zip 60 60 7 |
| | 1D# 17-08-329-025-1032 & 17-08-329-025-1078 |
| t, Plach kl. | et Anantharam |
| Street Address: | 1+0 Ridge Ave, Staten Island |
| Civ:Staten | Islandsvæ NYZip: 10304 |
| (Insert name a | and address of petrolipal above) hereby revoke all prior powers of attorney for property executed by |
| | Tara Anantharar |
| | |
| Street Address: | 1260 W WASHINGTON BLVD APT 608 |
| Civ.Chicago | DState: II. 27ip: 60607 |
| (MOTE: You me | sy not name co-agents using this form.) (by :: name and address of agent) as my attorney-in-fact |
| (my "ocent") 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 Se | ction 3-4 of the "Stututory Short Porm Power Attorney for Property Law" (including all |
| | out subject to any limitations on or additions to #2 specified powers inserted in paragraph 2 or 3 |
| below: | |
| | ust strike out any one or more of the following categorie, of powers you do not want your agent to |
| have. Fallure to | strike the title of any category will cause the powers der art ad in that category to be grunted to the |
| | o strike the title of any category will cause the powers der art ad in that category to be granted to the out a category you must draw a line through the title of category.) the transactions. I bond transactions. I bond transactions. personal property transactions. and ansactions. It plus transactions. curity, comployment and military service benefits. fs. d litigation. Ity and option transactions. speculions. |
| | |
| (a) Real catat | e transactions. |
| (-g | institution transactions. |
| (- | bond transactions. |
| | personal property transactions. |
| | mit box transactions. |
| | and annuity transactions. |
| | nt plan transactions. |
| | curity, comployment and military service benefits. |
| (i) Tax made | |
| (i) Claims an | d (blastine |
| | ity and option transactions. |
| (f) Business (| ny ana system names meth |
| 4-7 — ————— | operations. |
| (m) Batete ten | |

(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 limited in the following particulars: (NOTE: Here you may include any specific limitations you down appropriate, such as a prohibition or

Minels Power of Attorney for Minels Property BR: 3/1/11

(o) All other property transactions.

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| conditions on the sale of particular stock or real estate or special rul Net Applicable | es on borrowing by the agent.) |
|--|---|
| 3. In addition to the powers granted above, I grant my agent the foll (NOTE: Here you may add my other delegable powers including, n powers of appointment, name or change beneficiaries or joint tenan referred to below.) Not Applicable | rithout limitation, power to make gifts, exercise |

(NO'. E. Y ar agent will have authority to employ other persons as necessary to enable the agent to properly exercise t' A powers granted in this form, but your agent will have to make all discretionary decisions. If you want to give your a gen the right to delegate discretionary decision-making powers to others, you should keep paragraph 4, otherwise it an aid be struck out.)

4. My agent shall rise the right by written instrument to delegate any or all of the foregoing powers involving discretionary decision-riching to any person or persons whom my agent may select, but such delegation may be amended or revoked by right (including any successor) named by me who is acting under this power of attorney at the time of reference.

(NOTE: Your agent will be entiled to reimbursement for all reasonable expenses incurred in acting under this power of attorney. Strike out paragraph 5 4 you do not want your agent to also be entitled to remanable compensation for services as agent.)

5. My agest shall be estitled to reasonable remeastion for services rendered as agent under this power of attorney.

(NOTE: This power of attorney may be amended 61 i evoked by you at any time and in any menner. Absent amendment or revocation, the authority granted in this power of attorney will become effective at the time this power is signed and will continue until your death, unless a limitation on the beginning date or duration is made by initialing and completing one or both of paragraphs 6 and 7.

6. (XX) This power of attorney shall become effective on (Mont /Drz/Year):5/1/2020.

(NOTE: Insert a future date or event during your lifetime, such as a row 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. (XX) This power of attorney shall terminate on (Month/Date/Year):6/2/2020.

(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 were 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 A is successor agent in paragraph 8.)

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 4 5 acc or an adjudicated incompetent or disabled person or the person is unable to give prompt and intelligent consideration 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 puragraph 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.)

9. If a guardian of my entate (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

(I) po 8.

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| (NOTE: This form does not authorize yo | ur agent to appear in court for you as an attorney-at-law or otherwise to |
|---|--|
| engage in the practice of law unless he o | r she is a licensed attorney who is authorized to practice law in Illinois.) |
| | |
| 1.10 AT 0.00 T 1 | by reference and included as part of this form. |
| Detect: 129 | 4 h |
| Signed | (Principal) |
| | [|
| (NOTE This power of attorney will not | be effective unless it is signed by at least one witness and your signature is |
| note to using the form below. The not | ury may not also sign as a witness.) |
| | |
| The under go d witness certifies that _ | PLACHIK TAT ANAN 171A Common to one to be the |
| SHIP SCHOOL A TO HERE IS SAUGH HIGH A | iii hidiifiiliii ah an totoloisil house os assessol) abbanca aasaa us asa aa |
| notary public and r. an owiedged signing | and delivering the instrument as the free and voluntary act of the principal, |
| for the uses and purpora therein set fort | h. I believe him or her to be of sound mind and memory. The undersigned |
| witness also certifies that so witness is t | ot: (a) the attending physician or mental health service provider or a |
| returne of the physician or winder; (b) | an owner, operator, or relative of an owner or operator of a health care |
| lacinly in which the principal is a patient | t or resident; (c) a perent, sibling, descendent, or any spouse of such perent, |
| minutes made minimum of comes and placed an | ipal or any agent or successor agent under the foregoing power of attorney, withou, or adoption; or (d) an agent or successor agent under the foregoing |
| power of attorney. | 31. At an another or (a) an electron of any among an engineer. |
| | |
| Deut 4/29/2020 | |
| Signed | (Witness) |
| | , |
| | |
| (NOTE: Illinois requires only one witness | s, but other juri-dictions may require more than one witness. If you wish to |
| have a second witness, have him or her o | reriffy and sign here |
| | as contistion that PUTAL KILAT KNOWN IN THE AD MY |
| (Second witness) The undersigned witne | |
| same person whose same is subscribed a | s principal to the foregoing power of attorney, appeared before me and the |
| | and delivering the instrument at the first and voluntary act of the principal, |
| | h. I believe him or her to be of sound mina and memory. The undersigned |
| WHACES AISO CERTIFICS WHE WIS WILLIAMS IN I | not: (a) the attending physician or ment. I health service provider or a |
| resurve of the physician or provider; (0) | an owner, operator, or relative of an owner of executor of a health care to resident; (c) a perent, sibling, descendant, or any spouse of such parent, |
| income as descendent of either the spine | ipal or any agent or successor agent under the fixey the power of attorney, |
| mhether such relationship is by blood at | arriage, or adoption; or (d) an agent or successor age at up-for the foregoing |
| power of aligney 20 2020 | |
| Dated: 4729 2000 | |
| Signed | (Witness) |
| | |
| | |
| | 'C |
| | |
| | |

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3. NOTICE TO AGENT

(The following form shall be supplied to an agent appointed under a power of attorney for property)

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 diligence;
- (2) to p a complete and detailed record of all receipts, disbursements, and significant actions conducted for the principe:
- (4) at any to preserve the principal's estate plan, to the extent actually known by the agent, if preserving the plan is consisted 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 reasons are expectations to the extent actually in the principal's best interest.

As agent you must not to ray of the following:

- (1) act so as to creat: a conflict of interest that is inconsistent with the other principles in this Notice to Agent;
- (2) do any act beyond the (ath) rivy granted in this power of attorney;
- (3) commingle the principal a funds with your funds;
- (4) borrow funds or other property non, 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 our a as the death of the principal, your legal separation from the principal, or the dissolution of your marriage to the principal.

If you 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: "(Principal's Name) by (Your Name) as Agent"

The meaning of the powers granted to you is contained in Section 3-4 of the Illinois Power of Attorney Act, which is incorporated by reference into the body of the power of attorney for pro-cery document. If you violate your duties as agent or act outside the authority granted to you, you may be liable for my dameses, including attorney's fees and costs, caused by your violation. If there is saything about this document or your dath as that you do not understand, you should seek legal advice from an attorney."

Resolutory information respection the Illinois Perms of Attenues:

Text of Section after connection to P.A. 96-195) Sec. 3-3. Statutory short from power of attenues for property.

(a) The time prescribed in this Section casty be known as "statutory property nower" and may be send to great an gent nowers with respect to property and financial matters. The "stantory property power" consists of the following: (i) Notice to the Individual Sign. 1g the Illinois Statutory Short Form Power of Atterney for Property; and (3) Notice to Access. When a power of atterney is substantially the form prescribed in this Section is used, including all 3 items shows, with item (1), the Notice to Individual Signing the Illinois Statutory Short Form Power of Atterney for Property, on a separate short (oversibed) in 14-point type and 'to not street the meaning ent of attenues to the order of the meaning ent of the meaning entry than the content of the content of the content of the meaning entry than the content of the cont

Signing the Minnis Statestory Short Form Power of Attorney for Property, on a superate short (overwheet) in 14-point type and the sof lefterd prescribed in this Act.

(b) A power of otherway shaft also be destined to but in substantially the nature format as the statestory form if the explainatory language throughout the form (the language following the designation "NOTE:") is distinguished in some way from the legal paragraphs in the form, a sum the sum of holdhoe or other difference in typeface and four or point sine, even if the "Notice" paragraphs at the baginning are not on a superate of paper or are not in 14-point type, or if the principal's initials do not appear in the acknowledgement at the end of the "Notice" paragraph. The validity of a power of attorney as menting the templements of a statestory property power shaft not be affected by the fact that non or more of the categories of optional powers listed in the form are struck out or the form leades specific institutions on or additions to the agent's powers, as parasited by the farm. Nothing in this Article shall invalidate or but or me includes specific institutions on or additions to the agent's powers, as parasited by the farm. Nothing in this Article shall invalidate or but or me includes specific institutions on or additions to the agent's power, statement of power of attentions or the segment and the agent's powers, (iii) must be executed by the principal of any other respect to the statement property power.

sinement of the signature of a witness in addition to the principal and the notery, imposed by Public Act 91-790, applies only to note executed on or other June 9, 2000 (the officeive date of that Public Act). (NOTE: This amendatory Act of the 96th General Assemb survisious that referred to the one required witness as a "additional witness", and it also provides for the signature of an optional "seco dutatus provisions that referred to the one requivilinans".) (Soutca: P.A. 96-1195, eff. 7-1-11.)

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| State of 1/212 York SSN: 01/46320199 County of 1/2 Lath 021 The undersigned, a notary public that 1/2 Clark 1/2 And | In the Calthon | re county and state, certifies on to me to be the same person whose name is subscribed as and before me and the witness(cs) Kawala Manuara |
|--|-----------------------|---|
| (and the de draft salache | ender) in per | non and acknowledged signing and delivering the instrument as |
| the free and voluntary act of the | principal, for the us | es and purposes therein set forth (, and certified to the |
| Space below for n' any Seal Space below for n' any Seal OF NEW YORK NOTARY PUBLIC OLYUBLION OLYUBRION OLYUBLION OL | the agent(s). | Notery Public Signature: My commission expirelor NOTARY USE ON 0.3 (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.) |
| l certify that the signatures agent | (and successors) of | Sp.cism n signatures of |
| (agent) | (principal) | Ox. |
| (successor agent) | (principal) | - |
| (successor agent) | (principal) | |
| completing this form should be in Name: LAZUKKAT A | NAMED TO THE PORT | ne person preparing this form or who as isted the principal in |
| Address: 140 PIBAL | | 10304 |
| City: S7K762 States Sta | e: NT Zi | p: 19504 |
| Phone: | | |

EXHIBIT A

PARCEL 1:

UNIT 608 AND PARKING SPACE P-2 TOGETHER WITH ITS UNDIVIOED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN WESTGATB TERRACECPNDOMINIUM AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NO. 0021091433, AS AMENDED, IN SECTION 8, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS. :.

PARCEL 2:

EASEMENTS FOR LIGHT AND AIR AND INGRESS AND EGRESS IN FAVOR OF PARCEL 1 AS SET FORTH AND DEFINED IN THE DEEDS RECORDED AS DOCUMENT NOS. 13448963,13465539 AND 13465540, ALL IN COOK COUNTY, ILLINOIS.

PARCEL 3:

EASEMENTS APPURTENT TO AND FOR THE BENEFIT OF PARCEL 1 AS SET FORTH AND DEFINED IN THE DECLARATION OF EASEMENTS RECORDED, AS DOCUMENT NO. 0021091432FOR INGRESS AND EGRESS, ALL IN COOK COUNTY, ILLINOIS. of Cook Colling Clark's Office

PIN: 17-08-329-025-1032 and 17-08-329-025-1078