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Doc# 2030047048 Fee \$88.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 10/26/2020 11:12 AM PG: 1 OF 6

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Coot County Clart's Office Illinois Statutory Short Form Power of **Attorney**

Pin # 17-10-212-031-1013

Property Address:

240 East Illinois Street #406

Chicago, IL 60611

20BAR49860

2030047048 Page: 2 of 6 '

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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LOCATED AT:

240 E. Illinois St. #406 Chicago, II. 60611

240 E. Illinois St. #400, Unicago, IL 00011
POWER OF ATTORNEY made this 14th day of August, 20 20.
1. I,Neha Nigam, of240 E. Illinois St. #406 Chicago,Illinois_60611_, _USA hereby appointRohan Kalathiya, of _240 E Illinois St. #406 Chicago, IL, USA_60611_ as my attorney-in-fact (our "agent") to act for me and in my name (in any way I could act in person) with respect to the following powers, _s 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 3 below:
(YOU MUST STRIKE OUT ANY ONE OR MORE OF THE FOLLOWING CATEGORIES OF POWERS YOU DO NOT WANT YOUR AGENT TO HAVE. FAILURE TO STRIKE THE TITLE OF ANY CATEGORY WILL CAUSE THE POWERS DESCRIBED IN THAT CATEGORY TO BE GRANTED TO THE AGENT. TO STRIKE OUT A CATEGORY YOU MUST DRAW A LINE THROUGH THE TITLE OF THAT CATEGORY.)
(a) Real estate transactions.
(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 (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 borrowing by the agent):
Refinance of 240 E. Illinois St. #406, Chicago IL 60611_
· · · · · · · · · · · · · · · · · · ·
3. In addition to the powers granted above, we grant our agent the following powers (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): 2084-49860

ILLINOIS STATUTORY SHORT FORM

2030047048 Page: 3 of 6

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(YOUR AGENT W	ILL HAVE AUTH	ORITY TO EMP	PLOY OTHER PERS	SONS AS
NECESSARY TO	ENABLE THE AG	ENT TO PROPE	RLY EXERCISE TI	HE POWERS
GRANTED IN TH	S FORM, BUT YO	OUR AGENT WI	LL HAVE TO MAK	KE ALL

GRANTED IN THIS FORM, BUT YOUR AGENT WILL HAVE TO MAKE ALL DISCRETIONARY DECISIONS. IF YOU WANT TO GIVE YOUR AGENT THE RIGHT 10 DELEGATE DISCRETIONARY DECISION-MAKING POWERS TO OTHERS, YOU SHOULD KEEP THE NEXT SENTENCE, OTHERWISE IT SHOULD BE STRUCK OUT.)

4. Our agent shall have the right by written 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.

(YOUR AGENT WILL BE ENTITLED TO REIMBURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTORNEY. STRIKE OUT THE NEXT SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE ENTITLED TO REASONABLE COMPENSATION FOR SERVICES AS AGENT.)

5. Our agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.

(THIS POWER OF ATTORNEY MAY BE AMENDED OR REVOKED BY YOU AT ANY TIME AND IN ANY MANNER. 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 EITHER (OR ECTH) OF THE FOLLOWING:)

- 6. Whis power of attorney shall become effective on date of execution.
- 7. (Miss power of attorney shall terminate on __7/20/2021_____,

(IF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.)

8. If any agent named by us shall die, become incompetent, resign or refuse to accept the office of agent, we name the following (each to act alone and successively, in the order named) as successor(s) to such agent:

2030047048 Page: 4 of 6

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For purposes of this paragraph, 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.

(IF YOU WISH TO NAME YOUR AGENT AS GUARDIAN OF YOUR ESTATE, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY RETAINING THE FOLLOWING PARAGRAPH. THE COURT WILL APPOINT YOUR AGENT IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. STRIKE OUT PARAGRAPH 9 IF YOU DO NOT WANT YOUR AGENT TO ACT AS GUARD!AN.)

- 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.
- 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.

Signed _____

(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.)

Specimen signatures of agent

We certify that the signature of my agent is correct.

2030047048 Page: 5 of 6

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(THIS POWER OF ATTORNEY WILL NOT BE EFFECTIVE UNLESS IT IS NOTARIZED AND SIGNED BY AT LEAST ONE ADDITIONAL WITNESS, USING THE FORM BELOW.)

State of Illinois)
) SS. County of Cook)
The undersigned, a notary public in and for the above county and state, certifies that New known to me to be the same person whose name is subscrited as principal to the foregoing power of attorney, appeared before me and the additional winess in person and acknowledged signing and delivering the instrument as his free and vo'ur tary act of the principal, for the uses and purposes therein set forth, (and certified to the correctness of the signature of the agent). Dated: 814 2020
Notally Public Official Seal
My commission expires (SEALMy Commission Expires Jul 16, 2021.
The undersigned witness certifies that
Dated: 8/14/2020 Rambola Cammunks
Witness
(THE NAME AND ADDRESS OF THE PERSON PREPARING THIS FORM SHOULD BE INSERTED IF THE AGENT WILL HAVE POWER TO CONVEY ANY INTEREST IN REAL ESTATE.)
Return to the transfer of the
Neha Nigam
240 E. Illinois #406
Chicago, IL 60611

2030047048 Page: 6 of 6

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SCHEDULE C

PROPERTY DESCRIPTION

The land referred to in this Commitment is described as follows:

LEGAL DESCRIPTION: PARCEL 1: UN1T 406 IN THE LOFTS AT CITYFRONT PLAZA CONDOMINIUM, AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE: CERTAIN PARTS OF THE LAND, PROPERTY AND SPACE COMPRISED OF A PART OF BLOCK 11N CITYFRONT CENTER, BEING A RESUBDIVISION IN THE NORTH FRACTION OF SECTION 10. TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS: WHICH SURVEY IS ATTACHED TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT 0630315058, AS AMENDED FROM TIME TO TIME, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTERST IN THE COMMON ELEMENTS.

PARCEL 2: EASEMENT FOR INGRESS AND EGRESS FOR THE BENEFIT OF PARCEL 1 OVER THE COMMON AREAS AS CREATED BY THE DECLARATION OF COVENANTS, CONDITIONS, RESTRICTIONS, AND EASEMENTS DATED FEBRUARY 28,2006 AND RECORDED MARCH 8,2006 AS DOCUMENT 0606745116.

FOR INFORMATIONAL PURPOSES ONLY:

Chi Common Address: 240 East Illinois Street, Apt 406, Chicago, IL 60611

PIN# 17-10-212-031-1013