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Doc# 2109257045 Fee \$88.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00 KAREN A. YARBROUGH COOK COUNTY CLERK

DATE: 04/02/2021 02:22 PM PG: 1 OF 6

ILLINGIS DURABLE & SPECIFIC POWER OF ATTORNEY FOR PROPERTY

1. I, Chia Ming Kuo, here by revoke all prior Illinois Statutory Short Form Powers of Attorney for Property executed by me and appoint:

Michelle Kuo

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 amen aments), but subject to any limitations specified in paragraph 2 below:

Real estate transactions; Borrowing transactions;

Financial Institution Transactions; and

The power to purchase and mortgage the real estate at 7525 N.Claremont Avenue, Chicago, IL 60645, signing any and all documents necessary or desirable to effectuate said purchase and mortgage. (See "Exhibit A" attached hereto for Legal Description and PIN.). It is further noted and confirmed that this Power of Attorney is Durable and Specific to the property located at 7525 N Claremont Avenue, Chicago, IL 60645.

2. The powers granted above shall not include the following powers or shall be modified or limited in the following particulars:

NONE.

- 3. My 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.
 - 4. This power of attorney shall become effective on 5 March 2021.

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 - 4. This power of attorney shall become effective on 5 March 2021.

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- 5. This power of attorney shall terminate on 30 April 2021.
- 6. 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:

NONE

For purposes of this Paragraph 7, a person shall be considered to be incompetent if and while the person is a minor or an adjudicated incompetent or a person with a disability or the person is unable to give prompt and intelligent consideration to business matters, as certified by a licensed physician.

- 7. 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.
- 8. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.

9. The notice to Agent is incorporated by reference and included as part of this form

Dated: 02/2+12/

Signed:

Principal f

The undersigned witness certifies that Chia Ming Kuo, known to me whose 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; or (d) an agent or successor agent under the foregoing power of attorney.

Dated: 02/27/2021

Signed:

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT CIVIL CODE § 1189
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 truthfulness, accuracy, or validity of that document.
State of California County of Las Angels)
On Feb, 27, 2021 before me, S. Farzam, no dary public Here Insert Name and Title of the Officer
personally appeared Chia Ming Kuo Name(s) of Signer(s)
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is are subscribed to the within instrument and acknowledged to me that he she/they executed the same in his/her/their authorized capacity(ie.), and that by his/her/their signature is) on the instrument the person(s), of the entity upon behalf of which the person(s) acted, executed the instrument.
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
S. FARZAM Notary Public - California Los Angeles County Commission # 2241815 My Comm. Expires Jun 5, 2022 Signature Signature of Notary Public
Place Notary Seal Above OPTIONAL
Though this section is optional, completing this information can deter alteration on the document or fraudulent reattachment of this form to an unintended document.
Description of Attached Document: Title or Type of Document: Number of Pages: Signer(s) Other Than Named Above:
□ Corporate Officer — Title(s): □ Corporate Officer — Title(s): □ Partner — □ Limited □ General □ Partner — □ Limited □ General □ Individual □ Attorney in Fact □ Individual □ Attorney in Fact □ Trustee □ Guardian or Conservator □ Trustee □ Guardian or Conservator □ Other: □ Other:
Signer Is Representing: Signer Is Representing:

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CALIFORNIA ALL-PURPOSE ACKNOWLEDGME	CIVIL CODE 9 7189	
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 truthfulness, accuracy, or validity of that document.		
State of California (•	
County c. ! Os Angels)		
On Feb, 27,2021 before me, S. Fa	cream motory public,	
<i>Ca</i> fe	Here Insert Name and Title of the Officer	
personally appeared Maico Contr	eras Guzman	
Ž.	Name(t) of Signer(s)	
who proved to me on the basis of satisfactory e subscribed to the within instrume it and acknowled his her/their authorized capacity(ie.), and that by his or the entity upon behalf of which the or (son(s) acted	dged to me that he she/they executed the same in her/their signature(s) on the instrument the person(s),	
O	certify under PENALTY OF PERJURY under the laws the State of California that the foregoing paragraph true and correct.	
V	/CMESS my hand and official seal.	
S. FARZAM Notary Public - California Los Angeles County Commission # 2241815 My Comm. Expires Jun 5, 2022	ignature Signature of Notary Public	
	O//	
Place Notary Seal Above	3	
Though this section is optional, completing this is	IONAL	
Description of Attached Document		
Title or Type of Document:	Document Date:	
	,	
Capacity(ies) Claimed by Signer(s) Signer's Name: □ Corporate Officer — Title(s): □ Partner — □ Limited □ General □ Individual □ Attorney in Fact	Signer's Name:	
☐ Corporate Officer — Title(s):	☐ Corporate Officer — Title(s):	
☐ Partner — ☐ Limited ☐ General	□ Partner — □ Limited □ General	
	and the second of the second o	
☐ Trustee ☐ Guardian or Conservator ☐ Other:		
Signer Is Representing:	Signer is Representing:	

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EXHIBIT A

LEGAL DESCRIPTION:

Lot 15 in Block 2 in the Subdivision of the West 838 feet of Lots 1 and 2 in the Partition of Lots 1, 10, and 11 in Assessors Division of part of the Southwest Quarter of Section 30, Township 41 North, Range 14, East of the Third Principal Meridian, in Cook County, Illinois.

PIN: 11-30-301-019-0000

Commonly known as: 7525 N Claremont Ave, Chicago IL 60645