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Doc#. 2123728051 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 08/25/2021 09:32 AM Pg: 1 of 5

IL STATUTORY SHORT FORM POWER OF ATTORNEY

FIDELITY NATIONAL TITLE OC21026228

LLINOIS	STATUTORY	'SHORT FORM
POWER OF	ATTORNEY	FOR PROPERTY

1 27 411 41 117 117 117	
JOHN HENRY PAPEER, JR.	(insert name and address of principal)
Hereby revoke all prior powers of attorney to property execute	
Celeste Parker	(insert name and address of agent)
(NOTE: You may not name co-agents using this form.) as my name (in any way I could act in person) with respect to the "Statutory Short Form Power of Altorney for Property Law (in on or additions to the specified powers inserted in paragraph 2 (NOTE: You must strike out any one or more of the following have. Failure to strike the title of any category will cause the pagent. To strike out a category you must draw a line through the	a following powers, as defined in Section 3-4 of the cluding all amendments), but subject to any limitations of Delow: g caler or as of powers you do not want your agent to powers described in that category to be granted to the
Powers: to execute and sign documents necessar	ary for the secof the below referenced property.
Tower Investments, LLC - buyer	TS
Estate of Lizzie M. Parker - seller	0,55
Property Address - 11419 S Morgan, Chicago, II	L 60643

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 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.)

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NO EXCEPTIONS

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.)

no additional powers are granted.

(NOTE: Your agent will have authority to employ other persons as necessary to enable the agent to properly exercise the prover 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 decision-making powers to others, you should keep paragraph 4, otherwise it should be s'ruc't out.)

4. My agent share leve the right by written instrument to delegate any or all of the foregoing powers involving discretionary declarationary declaration of any person or persons whom my agent may select, but such delegation may be affected 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.)

My agent shell be entitled to reasoner/a compensation for services rendered as agent under this power of attorney.

(NOTE: This power of attorney may be amended or levoked 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 limited on on the beginning date or duration is made by initialing and completing one or both of paragraphs 6 and 7.)

6. X) This power of attorney shall become effective on

August 10, 2019

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

7. N This power of attorney shall terminate on

Date of sale of 11419 S. Morgan

(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 coor successor agent in paragraph 8.)

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

NOT APPLICABLE

For purposes of this 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.)

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.

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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

(NOTE: This form does not authorize your agent to appear 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 attorney who is authorized to practice law in illinois.) 11. The Notice to Agent is incorporated by reference and included as part of this form. **Dated**: Signed: John Henry Parker, Jr. (NOTE: This power of attorney will not be effective unless it is signed by at least one witness and your signature is notarized, using the form below. The notary may not also sign as a witness.) John Henry Parker, Jr. The undersigned witness certifies that known to me to be the same person who se liame is subscribed as principal to the foregoing power of attorney, appeared before me and the notary public and aclars yielded signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purpuers in arein 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, a shoption; or (d) an agent or successor agent under the foregoing power of attomey. Sign :d: Dated: Junit Clarks Office

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STATE OF MISSISSIPPI COUNTY OF LAUDERDALE

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EXHIBIT A

Order No.: OC21026228

For APN/Parcel ID(s): 25-20-230-012-0000 For Tax Map ID(s): 25-20-230-012-0000

LOT 11 IN E.M, MAY'S SUBDIVISION OF THE PART OF THE EAST 1/2 OF THE NORTH EAST 1/4 OF SECTION 20, TOWNSHIP 37 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, THE OF COOK COUNTY CLOTH'S OFFICE LYING SOUTHWESTERLY OF THE PITTSBURGH, CINCINNATI, CHICAGO AND ST. LOUIS RAILROAD, (EXCEPT THE SOUTH 33 FEET THEREOF TAKEN FOR 115TH STREET) IN COOK COUNTY, ILLINO/5.