RECORDING COVER SHEET

FILE 41072060G

(3/4)

**COOK COUNTY** 

Doc#. 2220721110 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 07/26/2022 12:09 PM Pg: 1 of 14

POWER OF ATTORNEY

OFFICE

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# STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

Includes Amendments Required By Public Act 96-1195
Form Valid July 1, 2011

#### 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 affairs, so it is important that you 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 agent must keep a record of all receipts, disbursements, and significant actions taken as your agent.

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 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.

The powers you give your agent are explained more fully in Section 3-4 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 Atterney, 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:

Principal's initials"

# ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, Kim Yung Lau of 3435 Thomas Drive, Palo Alto, CA 94303
(insert name and address of principal)
hereby revoke all prior statutory powers of attorney for property executed by me and appoint: (in sert name and address of agent) York Ho Lau of 1211 S. Fravis Ave, Apt. 805, Chicago, IL 60605
(NOTE: You may not name co-agents using this form.)
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 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 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.
(b) Financial institution transactions.
(c) Stock and bond transactions.
(d) Tangible personal property transactions.
(e) Safe deposit box transactions.

(f) Insurance and annuity transactions.
(g) Retirement plan transactions.
(h) Social Security, employment and military service benefits.
(i) Tax matters.
(j) Claims and litigation.
(k) Commodity and option transactions.
(l) Business operations.
(m) Borrowing transactions.
(n) Estate transactions.
(o) 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 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.)
This Power of Attorney shall be limited to my principal executing any and all documents for the disposition at property located at 1828 S. Wentworth Ave, Unit 2E, Parking Spot #82, Chicago, IL, 60616.
COLLEGE BE 1020 C. Welliam Ave, One 2E, Family apole 22, Olicago, IE, 600 Io.

3. In addition to the powers granted above, I grant my agent the following powers:

(NOTE: Here	-				±		
limitation, power	-	-	_		• ~		
beneficiaries or	joint tenant	s or revo	oke or a	amend any	trust spe	ecifically re	ferred to
below.)							
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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 decision-making 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 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.

(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 attorney.

(NOTE: 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 one or both of paragraphs 6 and 7.)

6. This power of attorney shall become effective on:
Upon execution.
(NOTE: Insert a future date or event during your lifetime, such as a cour 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. This power of attorney shall terminate on:
Upon completion of the closing at the property referenced in Paragraph 2.
(NOTE: Insert a future (late 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 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:
(Include name, address and phone number for any named successors)
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.
- 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 attorney-at-lay, 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, as set out below, is incorporated by reference and included as part of this form.

Dated: 7/15/22	Signed:
-17-1	(Principal)

(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.)

The undersigned witness certifies that \( \) \(\

Dated: 7/15/22	Signed:	
( )	-	(Witness)

Form Revised July 15, 2011

755 ILCS 45/3-3

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

(Second witness)		
The undersigned witness cer	tifies that	, known to
me to be the same person w	hose name is subscr	ibed as principal to the foregoing
		notary public and acknowledged
		and voluntary act of the principal,
		ve him or her to be of sound mind
		fies that the witness is not: (a) the
		rider or a relative of the physician
		an owner or operator of a health
		or resident; (c) a parent, sibling,
		ing, or descendant of either the
		the foregoing power of attorney,
whether such relationship is	by blood marriage	or adoption; or (d) an agent or
successor agent under the for	regoing power of atto	orney.
		•
Dated:	Signed:	
State of  County of	4/7	(Witness)
State of	)	()
	) SS.	Q <sub>n</sub>
County of	)	4
		`S =
		$O_{ic}$
		above county and state, certifies
		person whose name is subscribed
as principal to the foregoin	ng power of attorne	ey, appeared before me and the
		and acknowledged signing and
delivering the instrument as t	the free and voluntar	y act of the principal, for the uses
and purposes therein set forth	h (, and certified to t	the correctness of the signature(s)
of the agent(s)).		See Attached
		California All-Purpose Acknowledgement
Dated:	Signature	
		Notary Public
My commission expires:		
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#### **CALIFORNIA ACKNOWLEDGMENT**

CIVIL CODE § 1189

TEETERS OF THE SECRET OF THE S			
A notary public or other officer completing this certificate veri to which this certificate is attached, and not the truthfulness	fies only the identity of the individual who signed the document , accuracy, or validity of that document.		
State of California			
County of SANTA CLARA			
On 15TH Jus was before me,	JAY PATEL, NOTARY PUBLIC		
personally appeared	Here Insert Name and Title of the Officer		
	Name(s) of Signer(s)		
who proved to me on the basis of satisfactory evidence to the within instrument and acknowledged to me that authorized capacity(les), and that by his/her/in signature behalf of which the person(s) acted, executed the	ature(s) on the instrument the person(s), or the entity		
JAY PATEL COMM. # 2331547 NOTARY PUBLIC-CALIFORNIA SAN FRANCISCO COUNTY MY COMM. EXP. AUG. 13, 2024	I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.  WITNESS my hand and official seal.		
Place Notary Seal and/or Stamp Above	Sign the of Notary Public		
Completing this information can deter alteration of the document of fraudulent reattachment of this form to an unintended document.			
Description of Attached Document	Visc.		
Title or Type of Document:			
Document Date:	Number of Pages:		
Signer(s) Other Than Named Above:			
Capacity(ies) Claimed by Signer(s)  Signer's Name:  ☐ Corporate Officer — Title(s): ☐ Partner — ☐ Limited ☐ General ☐ Individual ☐ Attorney in Pact ☐ Trustee ☐ Guardian or Conservator ☐ Other: ☐ Signer is Representing:	Signer's Name:  Corporate Officer – Title(s);  Partner – Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer is Representing:		

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(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.)

Specimen signatures of agent (and successed	ors) I certify that the signatures of my agent (and successors) are correct.
(agent)	(principal)
(successor agent)	(principal)
(successor agent)	(principal)
(NOTE: The name, address, and phone nu or who assisted the principal in completing	umber of the person preparing this form
Name of Preparer:	Mona Naser, Esq.
Address:	Carlson Dash, LLC
	216 S. Jefferson Street, Suite 504
	Chicago, IL 60661
Phone:	312-382-1600

#### NOTICE TO AGENT POWER OF ATTORNEY FOR PROPERTY

(NOTE: This notice is incorporated by reference and included as a part of this Power of Attorney for Property.)

When you (the agent) 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;
- (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 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 property document.

If you violate your duties as agent or act cutside the authority granted to you, you may be liable for any damages, including attorney's fees and costs, caused by your violation.

If there is anything about this document or your duties that you do not understand, you should seek legal advice from an attorney."

(f) The requirement of the signature of a witness in addition to the principal and the notary, imposed by Public Act 91-790, applies only to instruments executed on or after June 9, 2000 (the effective date of that Public Act).

(NOTE: This amendatory Act of the 96th General Assembly (Public Act 96-1195, effective July 1, 2011) deletes provisions that referred to the one required witness as an "additional witness", and it also provides for the signature of an optional "second witness".)

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#### EXHIBIT "A"

PARCEL 1: UNIT 2E TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN 1828 SOUTH WENTWORTH CONDOMINIUM AS DELINEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NO. 0811922046, AS AMENDED, IN SECTION 21, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 2: UNIT P-82 TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS IN SANTE FE GARDEN V PARKING CONDOMINIUM AS DELPTEATED AND DEFINED IN THE DECLARATION RECORDED AS DOCUMENT NO. 0705115147, AS AMENDED, IN SECTION 21, TOWNSHIP 39 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

PARCEL 3: EASLMENTS APPURTENANT TO AND FOR THE BENEFIT OF PARCEL 1 AS SET FORTH AND EFFINED IN THE PLAT RECORDED AS DOCUMENT NO. 0609720074 AND AS CREATED BY DECLARATION OF EASEMENT RECORDED AS DOCUMENT NO. 0630331057, AS AMF VEED FOR INGRESS AND EGRESS, ALL IN COOK COUNTY, ILLINOIS. 3004 CC

Property address: 1828 South Wentworth Avenue, Unit 2E, Chicago, IL 60616

Tax Number: 17-21-436-045-1014

WILL OFFICE Property address: 1828 South Wentworth Avenue, P-82, Chicago, L 60616

Tax Number: 17-21-436-052-1082