Doc#. 2307641080 Fee: \$98.00

Karen A. Yarbrough Cook County Clerk

Date: 03/17/2023 10:45 AM Pg: 1 of 8

FIDELITY NATIONAL TITLE

File No.: OC22023926

Horace Lathan and WALTER LATHAN (Grantor)

POWER OF ATTORNEY and

JOSE LUIS FIVERTE CAZALES (Grantee)

> This page is added to provi le a lequate space for recording information and microfilming. Do not remove this page as it is now part of the document.

PREPARE BY AND RETURN THIS DOCUMENT TO:

Horace Latiran 432 WILDWOOD DR Park Forest, IL 50466

Fidelity National Title Company, LLC TOPT'S OFFICE

Page 1

6250 W 95th St Oak Lawn, IL 60453

Recording Cover Sheet ILD0100.doc / Updated: 03.12.13 Printed: 03.02.23 @ 10:00 AM by IL-FT-FILL-01040.235206-OC22023926

2307641080 Page: 2 of 8

UNOFFICIAL COPY

AGENT'S CERTIFICATION AND ACCEPTANCE OF AUTHORITY

	ne of agent), certify that the attached is a	
true copy of a power of attorney naming the undersigned		
7,	• •	
I certify that to the best of my knowledge the principal had the capacity to execute the power of attorney, is alive, and has not revoked the power of attorney; that my powers as agent have not been altered or terminated; and that the power of attorney remains in full force and effect.		
I accept appointment as agent under this power of attorney.		
6		
This certification and acceptance is made under penalty of perjury.*		
Dated: 27 February 2023		
(Agent's Signature) Juda No		
(Print Agent's Name) LINDA		
(Agent's Address) 432 Wildwood DK Park Forrest, Il 60466		
* (NOTE: Perjury is defined in Section 32-2 of the Criminal Code of 1961, (720 ILCS 5/32-2)		
and is a Class 3 felony.)	2	
Hatuling 2	1 February 2023	
NOTAS	FFICIAL SEAL" KATIE KING RY PUBLIC, STATE OF ILLII (OIS) MMISSION EXPIRES 6/12/2027	

2307641080 Page: 3 of 8

UNOFFICIAL COPY

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 co-acents.

This form does not impose a duty upon your agent to handle your financial affairs, so it is important that you select an agent who will agree to do this for you. It is also important to 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 fue 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 arrive properly. You may also revoke this Power of Attorney if you wish.

This Power of Attorney does not authorize your agent to appear or 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" paragrap's throughout this form are instructions.

You are not required to sign this Power of Attorney, 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, HORACE LATTHAN, of 7432 S. Aberdeen Chicago, IL 60621, hereby revoke all prior powers of attorney for property executed by me and appoint:

LINDA RICE 432 WILD WOOD DR. PARK FOREST, IL 60466

as my atterney-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 invitations on or additions to the specified powers inserted in paragraph 2 or 3 below: Real estate trans.

) Financial institution transactions.

(c) Stock and bond transactions.

(d) Tangible personal property transactions.

(a) Safe deposit box transactions.

and annuity transactions.

iitary service benefits.

- (k) Commodity and option transactions.
- (1) Business operations.
- (m) Borrowing transactions.
- (n) Estate transactions.
- (o) All other property transactions.

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

NO LIMITATIONS

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

NO ADDITIONAL POWERS

- 4. My agen shall have the right by written instrument to delegate any or all of the foregoing now ers 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.
- 5. My agent shall be entitled ('I desired) to reasonable compensation for services rendered as agent under this power of attorney.

) This power of attorney shell become effective on August 8, 2022

This power of attorney shall terminate on DATE OF DEATH.

8. If any agent named by me shall die, become incornation, 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:

LAUREN RICE

432 WILD WOOD DR. PARK FOREST, IL 60466

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 of the person is unable to give prompt and intelligent consideration to business matters, as certified by a licensed physician.

- 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.
- 11. The Notice to Agent is incorporated by reference and included as part of this form.

2307641080 Page: 6 of 8

UNOFFICIAL COPY

Dated: August 8, 2022

HORACE LATHAN

The undersigned witness certifies that HORACE LATHAN known to me to be 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 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: August 8, 2022

Witness

The undersigned witness certifies that HORACE LATHAN known to me to be 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 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 pat ent 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 (i) an agent or successor agent under the foregoing power of attorney.

Dated: August 8, 2022

Witness

State of ILLINOIS)
) SS.
County of COOK)

The undersigned, a notary public in and for the above county and state, certifies that HORACE LATHAN, known to me to be the same person whose name is subscribed as principal to the foregoing power of attorney, appeared before me and the witnesses

\[
\text{Opping Manage Action and } \text{Dana 18} \text{in person and } \text{in person and } \text{action of the principal, for the uses and purposes therein set forth} \]

Notary Public

My commission expires

Sep 17 , 2008

MAIL TO PREPARED BY:

Name: Lisa Glenn of Law Office of Lisa L. Glenn, LLC

Address: 600 Holiday Plaza Dr, Ste 178

Matteson, IL 60443

Phone: 708.833.8406

"OFFICIAL SEAL"
LISA L SLENN
Notany Public, State of Illinois
My Commission Expires 9/17/2022

Control Office

2307641080 Page: 8 of 8

UNOFFICIAL COPY

EXHIBIT A

Order No.: OC22023926

For APN/Parcel ID(s): 20-29-225-033-0000 For Tax Map ID(s): 20-29-225-033-0000

LOT 14 IN BLOCK 1 IN J.H. CLOUGH'S SUBDIVISION OF THE SOUTHWEST QUARTER OF THE JUF JE 14, L. GOOK CL. SOUTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION 29, TOWNSHIP 38 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN (EXCEPT THE SOUTH 149 FEET

THEREOF) IN COOK COUNTY, ILLINOIS