RECORDING COVER SHEET FILE NO. 41078206GS 1/3

Doc#. 2333533010 Fee: \$107.00

Karen A. Yarbrough Cook County Clerk

Date: 12/01/2023 09:15 AM Pg: 1 of 5

Cook COUNTY

TYPE OF DOCUMENT:

POWER OF ATTORNEY

LOX COOK COUNTY CLORA'S OFFICE Greater Illinois Title Company 300 East Roosevelt Road Wheaton, IL 60187

ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

1. I, Rachel Hesse hereby revoke all prior powers of attorney for property executed by me and appoint:

Name: Alisa M. Levin, Attorney at Law

Address: 2210 W Chicago Ave #1W, Chicago IL 60622

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 Powe: of Attorney for Property Law" (including all amendments), but subject to any limitations on of additions to the specified powers inserted in paragraph 2 or 3

(a) Real estate transactions pertaining to sale of

Address: 2000 South Michigan Avenue, Unit 202, Chicago IL

- —(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.
- ACONTO ON THE ONE OF THE ORIGINAL PROPERTY OF —(h) Social Security, employment and military service lene fits.
- - (i) Tax matters.
- (j) Claims and litigation.
- (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: N/A
 - 3. In addition to the powers granted above, I grant my agent the following powers: N/A
- 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.

- 5. My agent shall be entitled to reasonable compensation for services rendered as agent under this power of attorney.
 - 6. This power of attorney shall become effective on: October 1, 2023
 - 7. This power of attorney shall terminate on: March 28, 2024
- 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: ELLEN GUTIONTOV, ATTORNEY AT LAW, 312-217-4833

For purposes of this paragraph 3, a person shall be considered to be incompetent if and while the person is a minor or an adjurnated 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.

- 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.

Dated: October 2, 2023

Signed

The undersigned witness certifies that the Principal named above, Rachel Hesse, 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 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: 10-2-23
26 17 - Sam
Witness Signature
Address PL
MUNITERIN IC. 60060
State of Illinois)
) SS.
County of Cook)

The undersigned, a notary public in and for the above county and state, certifies that Ian Cull, 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 witness(es) named above, in person and acknowledged signing and delivering the instrument as the free and voluntary act of the principal, for the uses and purposes therein set forth (, and certified to the correctness of the signature(s) of the agent(s)).

Dated: 10-2-23		(O/4,
Notary Public School	Burang	Or.
My commission expires	8-17-24	

This Form has been prepared by:

Alisa M. Levin, Esq.
Levin Law, Ltd.

2210 W. Chicago Avenue
Chicago IL 60622

T: 312-720-0082

E: levinlawltd@gmail.com

"OFFICIAL SEAL"
DEBRA BERNARD
Notary Public, State Of Illinois
My Commission Expires 08/17/2024
Commission No. 421754

3

2333533010 Page: 5 of 5

UNOFFICIAL COPY

EXHIBIT "A"

PARCEL 1: UNIT 202 IN THE LOCOMOBILE LOFTS CONDOMINIUM, AS DELINEATED ON A SURVEY OF THE FOLLOWING DESCRIBED REAL ESTATE: PARTS OF BLOCK 2 IN GEORGE SMITH'S ADDITION TO CHICAGO. IN THE SOUTHWEST FRACTIONAL 1/4 OF SECTION 22, TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS; WHICH SURVEY IS ATTACHED AS AN EXHIBIT TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NUMBER 0422539031, AS AMENDED, TOGETHER WITH ITS UNDIVIDED PERCENTAGE INTEREST IN THE COMMON ELEMENTS, ALL IN COOK COUNTY, ILLINOIS.

PARCEL 2: THE EXCLUSIVE RIGHT TO THE USE OF STORAGE AREA S-202, A LIMITED COMMON ELEMENT AS DELINEATED ON A SUPPLEY ATTACHED TO THE DECLARATION OF CONDOMINIUM RECORDED AS DOCUMENT NUMBER 6422539031. PARCEL 3: EASEMENTS IN FAVOR OF PARCEL I FOR INGRESS, EGRESS, USE AND ENJOYMENT AS CREATED BY THE DECLARATION OF COVENANTS, CONDITIONS. EM. COOP RESTRICTIONS AND RECIPROCAL LASEMENTS RECORDED AS DOCUMENT NUMBER 0422539030.

Property address: 2000 South Michigan Avenue, Unit 202, Chicage, IL 60616 Contion

Tax Number: 17-22-312-027-1009