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ILLINOIS STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY

THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE NOTICE: PERSON YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR WHICH MAY INCLUDE POWERS TO PLEDGE, BELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. THIS FORM DOES NOT IMPOSE A DUTY ON YOUR AGENT TO EXERCISE GRANTED POWERS; BUT WHEN A POWER IS EXERCISED, AGENT WILL HAVE TO USE DUE CARE TO ACT FOR YOUR BENEFIT AND A COURT CAN TAKE AWAY THE POWERS OF IN ACCORDANCE WITH THIS FORM. YOUR AGENT IF IT FINDS THE AGENT IS NOT ACTING PROPERLY. YOU MAY NAME SUCCESSOR AGENTS UNDER THIS FORM BUT NOT CO-AGENTS. LIMIT THE DURATION OF THIS POWER IN THE MANNER YOU EXPRESSLY PROVIDID BELOW, UNTIL YOU REVOKE THIS POWER OR A COURT ACTING ON YOUR AGENT MAY EXERCISE THE POWERS YOUR STHALF TERMINATES IT, GIVEN HERE THROUGHOUT YOUR LIFETIME, EVEN AFTER YOU DISABLED. THE POWERS YOU GIVE YOUR AGENT ARE EXPLAINED MORE FULLY IN SECTION 3-4 OF THE ILLINOIS "STATUTORY SHORT FORM POWER OF ATTORNEY FOR PROPERTY LAW" OF WHICH THIS FORM IS A PART (SEE THE BACK OF THE FORM). THAT LAW EXPRESSLY PERMITS THE USE DIFFERENT FORM OF POWER OF ATTORNEY YOU MAY DESIRE. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU.

POWER OF ATTORNEY mean this 1 day of Tuly, 1992.

I, ROZA LAZAR, hereby appoint: NINOS LAZAR, as my attorney-infact (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" at 4206 North Bell, Chicago, Illinois, (including all amendments), but subject to any limitations on or additions to the specified powers inserted in paragraph 2 or 3 below:

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.

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- (i) Tax matters.
- (i) Claims and litigation.
- (k) Commodity and option transactions.
- (1) Business operations
- (m) Borrowing transactions.
- (n) Estate transactions.
- (c) All other property powers and transactions.

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 grant or shall be modified	ed above shall not include the following powered or limited in the following particulars:	ers
NONE		
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		reti
3. In addition to t following powers:	he powers granted above, I grant my agent	the
Nove		-
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YOUR AGENT WILL HAVE AUTHORITY TO EMPLOY OTHER PATIONS 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 REEP THE NEXT SENTENCE, 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.

YOUR AGENT WILL BE ENTITIED TO RETMEURSEMENT FOR ALL REASONABLE EXPENSES INCURRED IN ACTING UNDER THIS POWER OF ATTORNEY. STRIKE

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OUT THE NEXT SENTENCE IF YOU DO NOT WANT YOUR AGENT TO ALSO BE TENTITLED 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.

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 EITHER (OR BOTH) OF THE FOLLOWING:

7. This power of attorney shall terminate on SEP 1, 1993
TF YOU WISH TO NAME SUCCESSOR AGENTS, INSERT THE NAME(S) AND ADDRESS(ES) OF SUCH SUCCESSOR(S) IN THE FOLLOWING PARAGRAPH.
8. If any agent named by me shall die, become legally disabled resign or refuse to act. I name the following (each to act alone and successively, in the order named) as successor(s) to such agent:
Nové
IF YOU WISH TO NAME A GUARDIAN OF YOUR PERSON OR A GUARDIAN OF YOUR ESTATE, OR BOTH, IN THE EVENT A COURT DECIDES THAT ONE SHOULD BE APPOINTED, YOU MAY, BUT ARE NOT REQUIRED TO, DO SO BY INSERTING THE NAME(S) OF SUCH CUARDIAN(S) IN THE FOLLOWING PARAGRAPHS. THE COURT WILL APPOINT THE PERSON NOMINATED BY YOU IF THE COURT FINDS THAT SUCH APPOINTMENT WILL SERVE YOUR BEST INTERESTS AND WELFARE. YOU MAY, BUT ARE NOT REQUIRED TO, NOMINATE AS YOUR GUARDIAN(S) THIS SAME PERSON NAMED IN THIS FORM AS YOUR AGENT.
9. If a guardian of my person is to be appointed, I southate the following to serve as such guardian:
None
10. If a guardian of my estate (my property) is to be appointed, I nominate the following to serve as such guardian:
None

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11. I am fully informed as to all the contents of this form and understand the full import of this grant of powers to any agent.

signed Roza LAZAY

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 successors). are correct.

I certify that the signatures of my agent (and successors)

Ninos Wish (come)

(successor agent)

(successor agent)

(principal)

(principal)

THIS POWER OF ATTORNEY WILL NOT DE EFFECTIVE UNLESS IT IS NOTA-RIZED, USING THE FORM BELOW.

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M1 .	The state of the s
State of Allman	- ss.
county of Look	nato
whose name is subscribe attorney, appeared before and delivering the instrumeringial, for the uses	y public in and for the above county and IMPA, known to me to be the same person das principal to the foregoing power of me in person and acknowledged migning ent as the free and voluntary act of the and purposes therein set forth (and s of the signature(s) of the agent(s).
Dated: July 1, 1992- COTICAL MAI Joseph G. London Natury Public, State of By Commission Replace	Notary Public Ny Commission expires 11-28-92
THE NAME AND ADDRESS OF INSERTED IF THE AGENT WILL REAL ESTATE. This document was prepared	THE PERSON PREPARING THIS FORM SHOULD BE HAVE POWER TO CONVEY ANY INTEREST IN by:
	4/2
Mail So: Sweln Back 5225 M. Kea Cheeap Cel	lyer Axerie 60025

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STREET ADDRESS: 4206 NORTH BELL COPY

COUNTY: COOK CITY: CHICHAGO

TAX NUMBER: 14-18-310-039-0000

LEGAL DESCRIPTION:

LOT 10 IN BLOCK 3 IN HARM'S SUBDIVISION OF THAT PART OF LOT 3 IN BLOCK 1 IN W. B. OGDEN'S SUBDIVISION OF THE SOUTHWEST 1/4 OF SECTION 3, TOWNSHIP 40 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

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