

1948 LK05

2

**LIMITED POWER OF ATTORNEY
(REAL ESTATE)**

I, Diana A. Cuellar, of Lake County, State of Indiana, being at least 18 years of age and mentally competent, do hereby designate Rene Cuellar, of Lake County, State of Indiana, as my true and lawful attorney-in-fact.

2005 0527 15

I. POWERS AND PURPOSES

The above-named attorney-in-fact shall have authority with respect to real property transactions pursuant to Indiana Code §30-5-5-2, pertaining to the transaction real estate described below, situated in Lake County, State of Indiana:

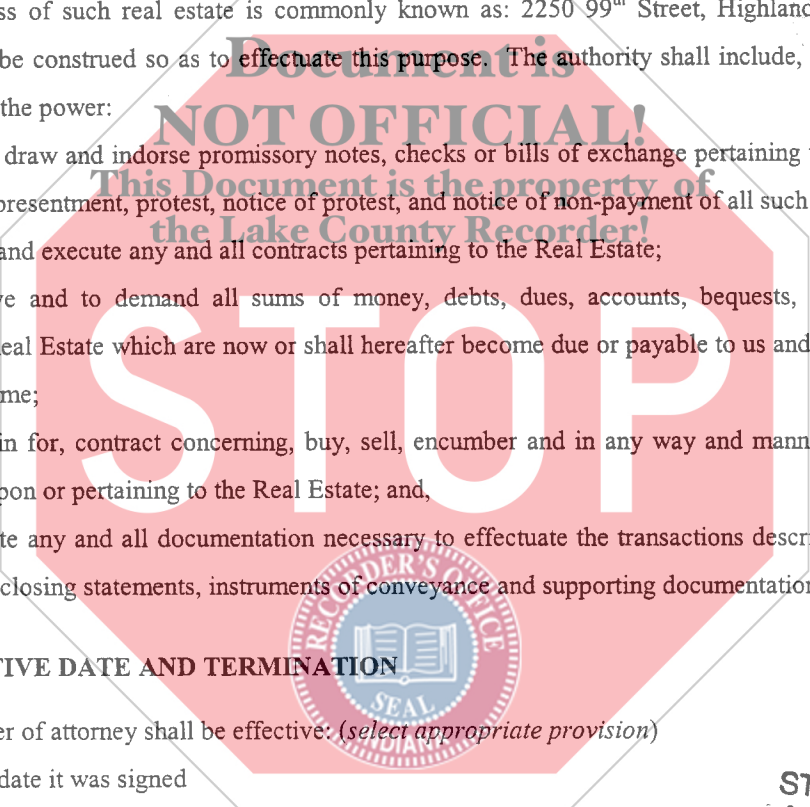
Lot Numbered 69 as shown on the recorded plat of Highland Terrace Estates 2nd Addition, to the Town of Highland, recorded in Plat Book 76, page 21, in the Office of the Recorder of Lake County, Indiana

the address of such real estate is commonly known as: 2250 99th Street, Highland, Indiana, (the Real Estate") and shall be construed so as to effectuate this purpose. The authority shall include, by way of illustration and not limitation, the power:

- To make, draw and indorse promissory notes, checks or bills of exchange pertaining to the Real Estate and to waive demand, presentment, protest, notice of protest, and notice of non-payment of all such instruments;
- To make and execute any and all contracts pertaining to the Real Estate;
- To receive and to demand all sums of money, debts, dues, accounts, bequests, interest and demands pertaining to the Real Estate which are now or shall hereafter become due or payable to us and to compromise, settle or discharge the same;
- To bargain for, contract concerning, buy, sell, encumber and in any way and manner, deal with personal property located upon or pertaining to the Real Estate; and,
- To execute any and all documentation necessary to effectuate the transactions described above, including, but not limited to, closing statements, instruments of conveyance and supporting documentation.

II. EFFECTIVE DATE AND TERMINATION

- A. The power of attorney shall be effective: *(select appropriate provision)*
- as of the date it was signed
 - as of the _____ day of _____, 2005
 - upon determination that I am disabled or incapacitated, or no longer capable of managing my affairs prudently. My disability or incapacity, for this may be established by the certificate of a qualified physician stating that I am unable to manage my affairs.



STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
MAY 27 2005

FILED

JUN 27 2005

STEPHEN R. STIGLICH
LAKE COUNTY AUDITOR

02124

HOLD FOR MERIDIAN TITLE CORP.

1948LK05

Handwritten initials: mlt

B. My disability or incompetence shall not affect or terminate this Power of Attorney.

C. This power of attorney shall terminate: (select appropriate provision)

- Upon my incapacity
- as of the _____ day of _____, 2005
- upon the execution and recordation with the Recorder's Office of the County where the Real Estate is located a written revocation hereof.

III. RATIFICATION AND INDEMNIFICATION

I/We hereby ratify and confirm all that my attorney-in-fact shall do by virtue hereof. Further, I/We agree to indemnify and hold harmless any person who, in good faith, acts under this Power of Attorney or transacts business with my attorney-in-fact in reliance upon this Power, without actual knowledge of its revocation.

IN WITNESS WHEREOF, I/We have hereunto set my/our hand(s) and seal(s) this 20 day of JUNE, 2005

Diana A. Guillet
Printed: Diana A. Guillet

Rene Curllan
Printed: RENE CURLLAN

STATE OF INDIANA)
COUNTY OF Laurel) SS:

Before me, a Notary Public in and for said County and State, personally appeared DIANA A. CURLLAN and RENE CURLLAN who acknowledged the execution of the foregoing Power of Attorney, and who, having been duly sworn, stated that any and all representations herein contained are true.

WITNESS my hand and Notarial seal this 20 day of June, 2005.

Printed: Aimee Beauchamp Notary Public

My Commission Expires: 4/24/09
County of Residence: Laurel

