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2007 JUN - 4 10:00

LIMITED POWER OF ATTORNEY
(REAL ESTATE)

620071268 LD

I/We, Sunah C. Kim
Hampden County, State of MA being at least 18 years of age and mentally competent, do hereby
designate Eungin O. Kim
of Lake County, State of Indiana, as my true and lawful attorney-in-fact.

I. POWERS AND PURPOSES

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

The North 53.5 feet by parallel lines of Lot 27, in the corrected
plat of Stonebrook Phase Two, a Planned Unit Development, to the
Town of Schererville, as per plat thereof, recorded in Plat Book
69 Page 16, in the Office of the Recorder of Lake County, Indiana.

the address of such real estate is commonly known as 725 Newcastle Drive Schererville, IN 46375
(the "Real Estate") and shall be construed so as to effectuate this purpose. This authority shall include, by
way of illustration and not limitation, the power:

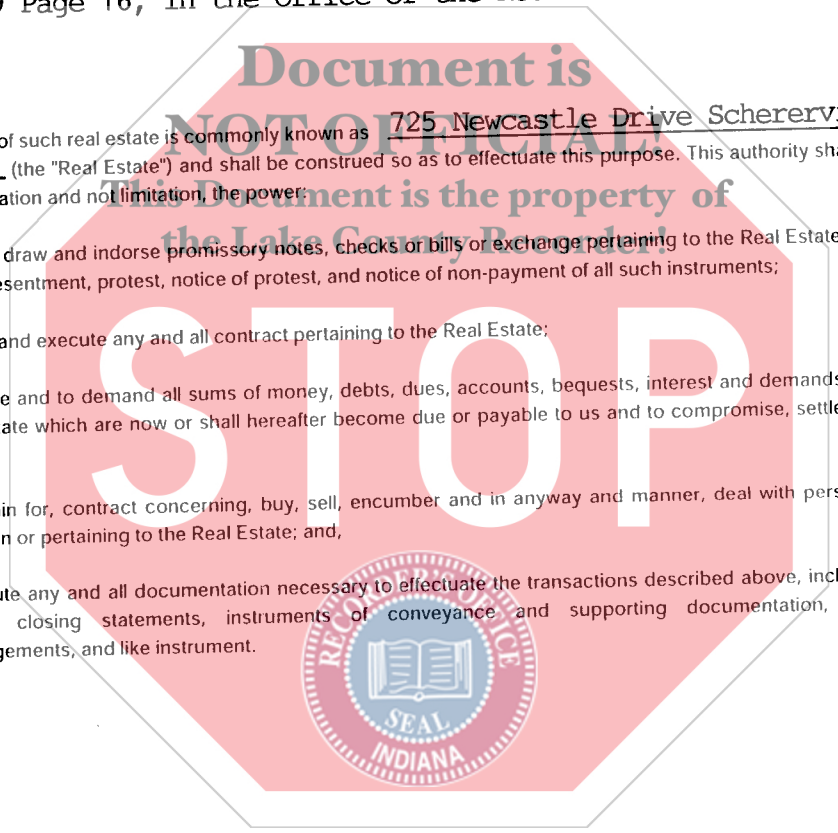
To make, draw and indorse promissory notes, checks or bills of exchange pertaining to the Real Estate and to waive
demand, presentment, protest, notice of protest, and notice of non-payment of all such instruments;

To make and execute any and all contract 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 anyway 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, certifications,
acknowledgements, and like instrument.



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FILED

JUN - 4 2007

PEGGY HOLINGA KATONA
LAKE COUNTY AUDITOR

007290

Chicago Fire Insurance Company

II. EFFECTIVE DATE AND TERMINATION

A. This power of attorney shall be effective: (select appropriate provision)

as of the date it is signed

as of the _____ day of _____, _____

upon the determination that I am disabled or incapacitated, or no longer capable of managing my affairs prudently. My disability or incapacity, for this purpose, may be established by the certificate of a qualified physician stating that I am unable to manage my affairs.

B. My disability or incompetence (select appropriate provision): (shall) ~~not~~ affect or terminate this Power of Attorney.

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

upon my incapacity

upon the _____ day of _____

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 that all 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 28 day of June 2006.

X Sunah C. Kim

Printed: Sunah C. Kim

Printed: _____

STATE OF MASSACHUSETTS } SS:
COUNTY OF Hampden

Before me, a Notary Public in and for said County and State, personally appeared Sunah Kim and _____ who acknowledged the execution of the foregoing Power of Attorney, and who, having been duly sworn, stated that any representations therein contained are true.

WITNESS my hand and Notarial seal, this 28 day of June, 2006
Printed: Linda S. Baillargeon, Notary Public Linda S. Baillargeon

My Commission Expires: 9/3/2010 My County of Residence: (US) - Hampden

This instrument was prepared by Alicia Wallace, AVP

