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LIMITED POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, **Scott Sarti**, being at least 18 years of age and mentally competent, do hereby make, constitute, designate and appoint **Rene Barreda** my true and lawful attorney-in-fact for me and in my name, place, and stead, and on my behalf, and for my use and benefit, for the following limited purposes:

1. To execute, acknowledge and deliver any and all contracts, deeds, vendor's affidavits, settlement statements, notes, mortgages, Federal Truth in Lending Statements, leases, assignments of This Document is the property of mortgage, extensions of mortgage, satisfactions of mortgage, releases of mortgage, subordination agreements, and any other instrument or agreement of any kind or nature whatsoever, in connection with, either directly or indirectly, the sale and purchase of real estate described particularly as follows, to-wit:

Lot 13 in Resubdivision of Lots 24 to 41 in Block 5 in Wicker Park Manor, in the Town of Highland, as per plat thereof, recorded in Plat Book 29, page 98, in the Office of the Recorder of Lake County, Indiana.

Commonly known as: 2516 Wicker Park Dr., Highland, IN 46322

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PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR

1962 1962 Km 2. The said attorney-in-fact is further empowered to receive checks or cash or any payments to be made in connection with the closing of title to said property; and to receive on my behalf any money payable to me on the closing, whether for purchase price or adjustments of taxes, insurance premiums, or otherwise; and further to pay on my behalf all amounts that I may be required to pay in such transaction, whether for taxes or otherwise.

This power of Attorney shall become effective on the 18 day of NALCH, 2008; and shall not be affected by my subsequent disability or incompetence.

I hereby reserve the right of revocation; however, this Power of Attorney shall continue in full force and effect until the 19 day of MALCH, 2008.

Further, I hereby ratify and confirm all that my attorney-in-fact shall do by virtue of this the Lake County Recorder!

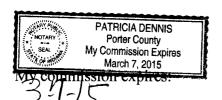
Power of Attorney, and agree to indemnify and hold harmless any person who, in good faith, acts under this Power of Attorney or transacts business with my attorney-in-fact in reliance upon this power, without actual knowledge of its revocation.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this ______ day of MAILI+_____, 2008.

Scott Sarti

| STATE OF INDIANA |) |
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| COUNTY OF |) |

Before me, a Notary Public in and for said county and state, personally appeared Scott Sarti acknowledged the execution of the foregoing Limited Power of Attorney.



County of Residence: Notary Public

This instrument prepared by: Sascha Escue, 333 N. Pennsylvania St. #510, Indianapolis, IN 46204

"I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law." Sascha Escue

