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STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2008 021127

2008 MAR 25 AM 10:14

MICHAEL A. BROWN
RECORDER

**POWER OF ATTORNEY
REAL PROPERTY AND BANKING TRANSACTIONS
(LIMITED TO REAL ESTATE DESCRIBED HEREIN)**

I, **Michelle D. Larkin**, of **Lake** County, State of Indiana, do hereby designate **Justin M. Larkin** of **Lake** County, State of Indiana, my true and lawful attorney-in-fact, to have the following powers:

General Authority with respect to real property transactions, as set forth in IC 30-5-5-2, AND General Authority with respect to banking transactions, as set forth in IC 30-5-5-5, limited and exercisable solely as to the real estate located at **210 W. Old Ridge Road, Hobart, IN 46342.**

I hereby reserve the right of revocation; however, this Power of Attorney shall continue in full force and effect until I have executed and recorded in the office of the Recorder of **Marion** County, Indiana, a written revocation thereof. All acts by my said attorney-in-fact taken under this Power of Attorney prior to recording of such revocation shall be valid and binding on me as above set forth.

The attorney-in-fact named herein shall have the power to delegate in writing, in a form recordable under the laws of the State of Indiana, to one or more persons and or all powers given to said attorney-in-fact by this Power of Attorney. This Power of Attorney and the authority authorized herein shall not be terminated or otherwise affected by my incapacity.

Any photocopy, facsimile or other reproduction of this Power of Attorney may be used, accepted and relied upon in lieu of the original hereof for the purpose of recording, filing or otherwise utilizing the same.

IN WITNESS WHEREOF, I have hereunto set my hand, this 02 day of March, 2008.

Michelle D. Larkin
Michelle D. Larkin



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PEGGY HOLINGA KATONA
LAKE COUNTY RECORDER

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STATE OF Indiana

COUNTY OF Lake

Before me, a Notary Public in and for said County and State, personally appeared **Michelle D. Larkin** who, having executed the same in my presence, acknowledged the execution of the forgoing Power of Attorney, and who, having been duly sworn, stated that any representations therein contained are true.

WITNESS my hand, and Notary Seal this 2nd day of March, 2008.

Judith A. Ford
Notary Public

County of Residence: _____
My Commission Expires: _____

This instrument prepared by:
Michelle D. Larkin, Assisted by: Nations Title 3850 Priority Way South Dr., Suite 112,
Indianapolis, IN 46240 ↗

I affirm under the penalties of perjury, that I have taken reasonable care to redact each social security number in this document. Unless required by law.

Rich Cline
Name: Rich Cline

