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DURABLE POWER OF ATTORNEY

I, ZORAN VELINOV of LAKE County, Indiana, being at least eighteen (18) years of age and mentally competent, do hereby create a durable Power of Attorney, "Power", and appoint the following person as my Attorney In Fact, with power to act for me according to Indiana Code (I.C.) 30-5-5, as it now exists or as it may be amended in the future:

Attorney in Fact: DIANA HERO, of LAKE County, Indiana.

1. **POWERS:** I give my Attorney In Fact, including any Successor Attorney In Fact, the powers contained in this Power. These powers are granted upon the condition they will be used for my benefit and on my behalf and will be exercised only in a fiduciary capacity.

(a) **REAL PROPERTY.** Authority with respect to real property transactions pursuant to I.C. 30-5-5-2, more specifically real property commonly known as: 338 DAHLGREN DRIVE, CROWN POINT, IN 46307

UNIT 3-3 IN SECTION 1-A IN BEAVER DAM VILLAGE, AS PER PLAT THEREOF RECORDED IN PLAT BOOK 41, PAGE 32, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

(b) **ALL OTHER MATTERS.** Authority with respect to all other possible matters and affairs affecting aforementioned property pursuant to I.C. 30-5-5-19.

In the exercise of any powers described in this Power, my Attorney In Fact shall have full power and authority to do and perform every act and thing necessary, proper or convenient to be done as fully to all intents and purposes as I might or could do for myself.

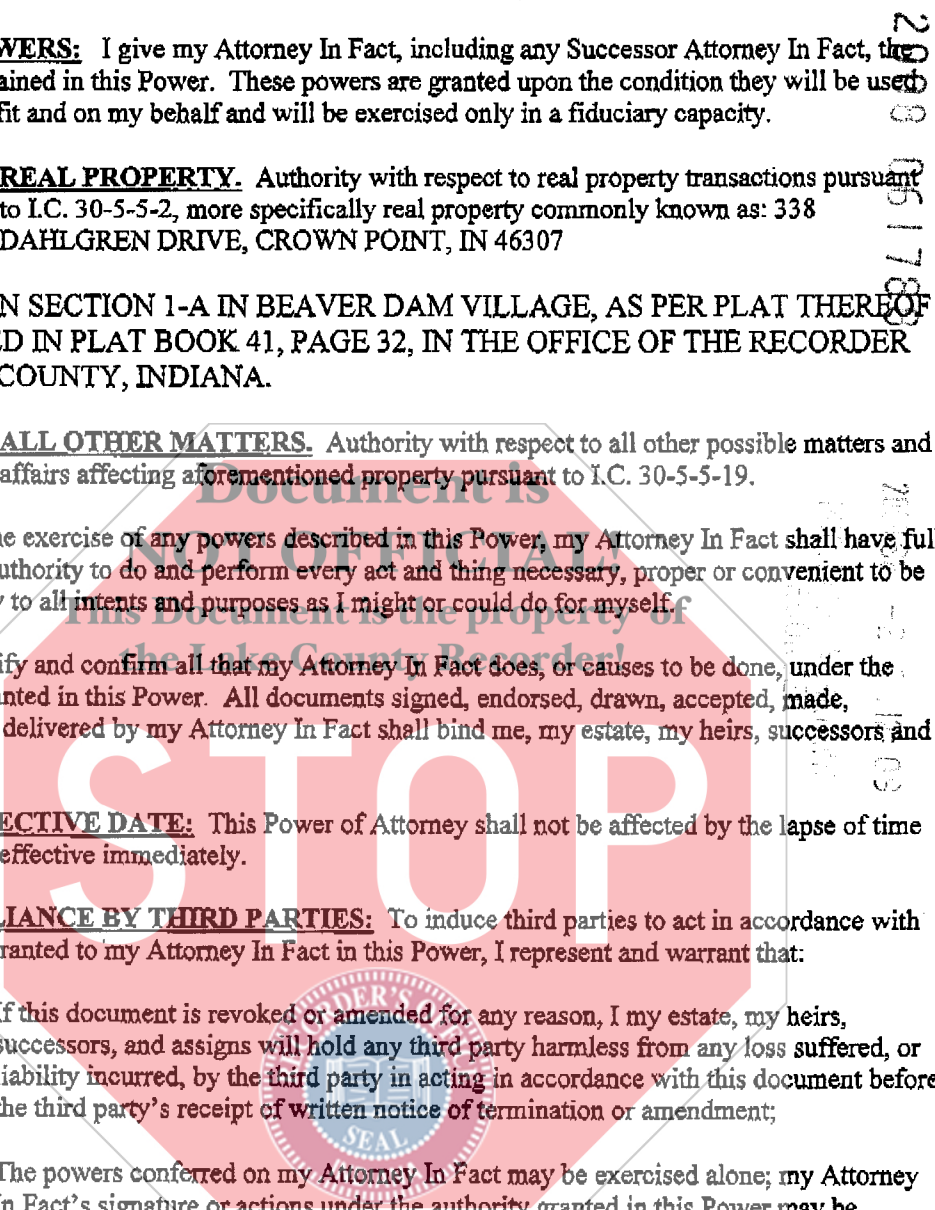
I ratify and confirm all that my Attorney In Fact does, or causes to be done, under the authority granted in this Power. All documents signed, endorsed, drawn, accepted, made, executed, or delivered by my Attorney In Fact shall bind me, my estate, my heirs, successors and assigns.

2. **EFFECTIVE DATE:** This Power of Attorney shall not be affected by the lapse of time and shall be effective immediately.

3. **RELIANCE BY THIRD PARTIES:** To induce third parties to act in accordance with the powers granted to my Attorney In Fact in this Power, I represent and warrant that:

(a) If this document is revoked or amended for any reason, I my estate, my heirs, successors, and assigns will hold any third party harmless from any loss suffered, or liability incurred, by the third party in acting in accordance with this document before the third party's receipt of written notice of termination or amendment;

(b) The powers conferred on my Attorney In Fact may be exercised alone; my Attorney In Fact's signature or actions under the authority granted in this Power may be accepted by third parties as fully authorized by me and with the same force and effect as if I were personally present, competent, and acting on my own behalf;



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AUG 29 2008

PEGGY HOLINGA
LAKE COUNTY AUDITOR

NO. 141 P. 1

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EAGLE LAND TITLE LLC

JUN. 27. 2008 12:14PM

(c) No person who acts in reliance upon any representation of my Attorney In Fact as to the scope of my Attorney In Fact's authority granted under this document shall incur any liability to me, my estate, my heirs, successors, or assigns for permitting my Attorney In Fact to exercise any such power, nor shall any person who deals with my Attorney In Fact be responsible to determine or ensure the proper application of funds or property;

4. **TERMINATION:** This Power shall continue in full force and effect and shall of its own effect and demise terminate at the conclusion of said purchase of the aforementioned property, or the 1ST day of AUGUST, 2008, whichever comes first. Amendments to this Power shall be made in writing by me personally.

5. **GENERAL PROVISIONS:**

- (a) Persons dealing with my Attorney In Fact may rely fully on a photostatic copy of this Power;
- (b) If any of the provision of this Power are found to be invalid for any reason, this invalidity shall not affect any of the other provisions of this Power, and all invalid provisions shall be wholly disregarded.
- (c) All questions pertaining to validity, interpretation, and administration of the Power shall be determined in accordance with the laws of Indiana;
- (d) My Attorney In Fact shall not be liable to me or any of my successors in interest for any action taken or not taken in good faith, but shall be liable for my willful misconduct or gross negligence;
- (e) I have received from my Attorney, a copy of those sections of Indiana Code 30-5-5, which are incorporated by reference in Section 1 of this Power. I have received these powers and am incorporating by reference herein those which comply with my wishes.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this 27 day of JUNE, 2008.

Zoran Velinov
ZORAN VELINOV., Declarant
A resident of LAKE County, Indiana

STATE OF INDIANA
COUNTY OF Lake



Before me the undersigned, a Notary Public for Lake County, State of Indiana, personally appeared ZORAN VELINOV being first duly sworn by me upon oath, stated that the facts alleged in the foregoing instrument are true. Signed and sealed this 27th day of June, 2008.

My commission expires:
May 21, 2011

Signature: *Teresa L. Peron*

Printed:
TERESA L. PERON
NOTARY PUBLIC
SEAL
STATE OF INDIANA - COUNTY OF LAKE
MY COMMISSION EXPIRES MAY 21, 2011

Resident of: _____ County,
Indiana

This instrument prepared by: KW MANN, ATTORNEY AT LAW

I affirm, under penalties for perjury, that I
have taken reasonable care to redact each
social security number in this document,
unless required by law. Frank J. Banks

