

POWER OF ATTORNEY

THOR REAL ESTATE LLC , a limited liability company, formed and existing under the laws of the State of California and having its principal place of business at 13351-D Riverside # 413 Sherman Oaks, CA 91423-2508 as the Owner (hereinafter called the "Owner") hereby appoints Home Servicing, LLC (hereinafter called "Home"), as its true and lawful attorney-in-fact to act in the name, place and stead of the Owner for the purposes set forth below.

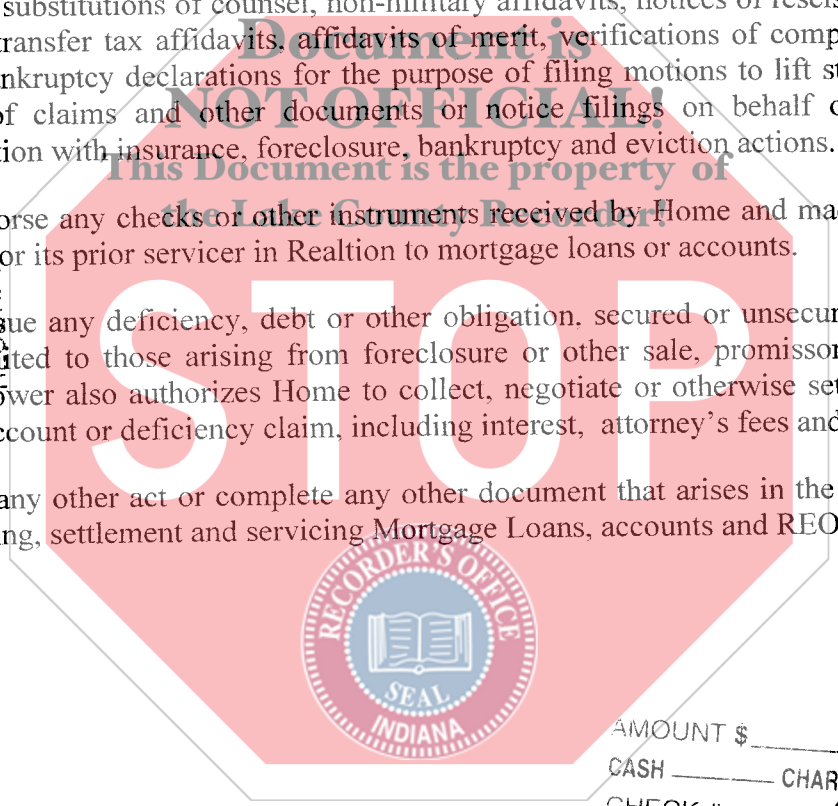
The said attorneys-in-fact, and each of them, are hereby authorized, and empowered, as follows:

1. To execute, acknowledge, seal and deliver deed of trust/mortgage note endorsements, lost note affidavits, assignments of deed of trust/mortgage and other recorded documents, allonges and endorsements of promissory note (s) satisfactions/releases/reconveyances of deed of trust/mortgage, subordinations and loan modifications, tax authority notifications and declarations, deeds, bills of sale, and other instruments of sale, conveyance, and transfer, appropriately completed, with all ordinary or necessary endorsements, acknowledgments, assignments, affidavits, and supporting documents as may be necessary or appropriate to effect its execution, delivery, conveyance, recordation or filing.
2. To execute and deliver insurance filings and claims, affidavits of debt, substitutions of trustee, substitutions of counsel, non-military affidavits, notices of rescission, foreclosure deeds, transfer tax affidavits, affidavits of merit, verifications of complaints, notices to quit, bankruptcy declarations for the purpose of filing motions to lift stays, transfer and proof of claims and other documents or notice filings on behalf of the Owner in connection with insurance, foreclosure, bankruptcy and eviction actions.
To endorse any checks or other instruments received by Home and made payable to the Owner or its prior servicer in Realtion to mortgage loans or accounts.
3. To pursue any deficiency, debt or other obligation, secured or unsecured, including but not limited to those arising from foreclosure or other sale, promissory note or check. This power also authorizes Home to collect, negotiate or otherwise settle any mortgage loan, account or deficiency claim, including interest, attorney's fees and court costs; .
5. To do any other act or complete any other document that arises in the normal course of collecting, settlement and servicing Mortgage Loans, accounts and REO Properties.

STATE OF INDIANA
CLERK OF SUPERIOR COURT
FILED 4 15 0300

2011 DEC 16 AM 8:37

2011 072820



AMOUNT \$ 16
 CASH _____ CHARGE _____
 CHECK # 527764
 OVERAGE _____
 COPY _____
 NON-COM
 CLERK [Signature]

E

Dated: November 1, 2011.

THOR REAL ESTATE LLC

Witness:

Jenny Escanilla
Name: _____

[Signature]

Name: Bob Lewandowski
Title: manager

Witness:

[Signature]
Name: DAVID MALDONADO



See Attached Notarial Cert.

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Los Angeles

On Nov. 2, 2011 before me, Todd Glickman Notary Public,
(Here insert name and title of the officer)

personally appeared Bob Lewandowski,

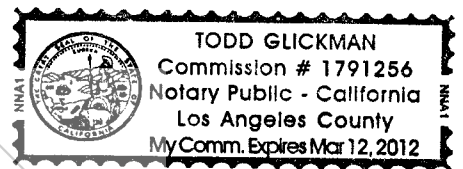
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Todd Glickman
Signature of Notary Public

Document is
NOT OFFICIAL!
(Notary Seal)



This Document is the property of
the Lake County Recorder!
ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

DESCRIPTION OF THE ATTACHED DOCUMENT	
<u>Power of Attorney</u> (Title or description of attached document)	
<u>Appointing Home Services</u> (Title or description of attached document continued)	
Number of Pages <u>2</u>	Document Date <u>11-1-11</u>
(Additional information)	

CAPACITY CLAIMED BY THE SIGNER	
<input type="checkbox"/> Individual (s)	
<input type="checkbox"/> Corporate Officer	
(Title)	
<input type="checkbox"/> Partner(s)	
<input type="checkbox"/> Attorney-in-Fact	
<input type="checkbox"/> Trustee(s)	
<input checked="" type="checkbox"/> Other <u>MANAGER</u>	