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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2014 083701

2014 DEC 30 PM 12:19

MICHAEL B. BROWN  
RECORDER

**LIMITED POWER OF ATTORNEY (BUYER/BORROWER)**

Know all men by these presents that **Kyle Moline and Joanne Moline** do hereby make, constitute and appoint **Susan Hoffman**, an adult person, to be their true and lawful Attorney-in-Fact, for me and in my name, place and stead to do any and all of the following:

1. To bargain, agree, contract to purchase, complete such purchase and to receive and take possession, or refinance of all property real and personal located at and described as follows:

**SEE ATTACHED EXHIBIT "A"**

Property Address: 1161 Mary Ellen Drive, Crown Point, IN 46307

2. To enter into and to incur by loan agreements and escrow agreements in connection with such purchase or refinance, and for the purpose of executing a second or equity mortgage upon such terms, for such rate of interest and loan repayment terms, and providing for such security and collateral as my Attorney-in-Fact shall deem fit.
3. To encumber the above described real estate and personal property and to execute and sign and acknowledge such evidences of debt, promissory notes, security documents, mortgages, deeds, deeds of trust, covenants, agreements, hypothecations, reconveyances and all other loan and security documents, including, without limitation, Uniform Commercial Code Security Agreements and financing statements, and securing performance and payment of all loan obligations as may be required or requested by the lender of funds for such purchase and those in addition thereto, if any, required by the Escrow Agent supervising the closing of such loan and purchase, all, upon such terms, conditions and provisions as my Attorney-in-Fact shall deem fit.
4. To sign and deliver and as necessary, to acknowledge and swear to all closing statements, certificates, written statements and acknowledgments and all other forms required or requested by any such lender, or any governmental or private agency, firm or corporation insuring or guaranteeing repayment of such loan, or by any governmental agency, firm or corporation which may purchase said loan.
5. To insure or cause insurance to be taken out on the buildings, structures and personal property being purchased, at such premium, for such period and covering such risks and underwritten by such insurer as my Attorney-in-Fact shall deem fit.
6. To cause title insurance or other evidence of title to be issued insuring or certifying the status of the title to the real estate being purchased, as required by the lender, by such title insurance underwriter for such amount and insuring such risks as my said Attorney-in-Fact, shall deem fit.
7. To appoint and authorize any other person or corporation to exercise the power and authority for and on behalf of my Attorney-in-Fact should my Attorney-in-Fact not be so available to exercise such power.

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**HOLD FOR MERIDIAN TITLE CORP**

17  
AO  
MTC

**EXHIBIT A**

Lot Numbered 307 in Ellendale Farm Unit Eight as per plat thereof recorded in Plat Book 94, page 95 in the Office of the Recorder of Lake County, Indiana.



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8. To perform all those functions and activities set out and authorized in I.C. 30-5-5-2.

This power shall not be affected by my later disability or incompetence.

We give and grant to our said Attorney-In-Fact full power and authority to do and perform all and every act and thing requisite or proper to be done in the exercise of the rights and powers herein granted, as fully, to all intents and purposes, as I might or could do if personally present, with full power and substitution and revocation and with full authority to deal with the property as authorized above hereby ratifying and confirming all that my said Attorney-In-Fact, or his substitute, or substitutes, lawfully do or cause to be done by virtue of the authority granted herein.

Signed this 1 day of DECEMBER, 2014.

Kyle Moline  
\_\_\_\_\_  
**Kyle Moline**

J. Moline  
\_\_\_\_\_  
**Joanne Moline**

United Arab Emirates )  
Emirate of Abu Dhabi )  
City of Abu Dhabi ) SS:  
Embassy of the United )  
States of America )

State of \_\_\_\_\_, County of \_\_\_\_\_ SS:

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared the within named **Kyle Moline and Joanne Moline**, who acknowledged the execution of the foregoing Limited Power of Attorney to be a voluntary act and deed for the uses and purposes therein set forth.

WITNESS, my hand and Notarial Seal this 01 day of DEC, 2014

My Commission Expires: **INDEFINITELY**

[Signature]  
\_\_\_\_\_  
Signature of Notary Public

Printed Name of Notary Public Notary Public

Abu Dhabi,

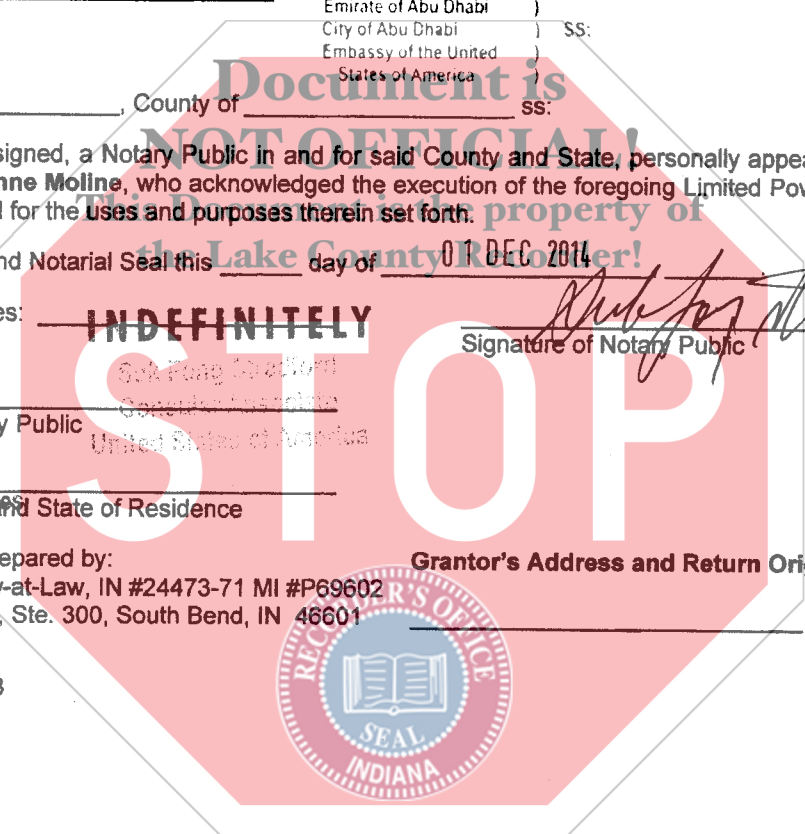
Notary Public County and State of Residence

This instrument was prepared by:  
Debra A. Guy, Attorney-at-Law, IN #24473-71 MI #P69602  
202 S. Michigan Street, Ste. 300, South Bend, IN 46601

Grantor's Address and Return Original Document to:

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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. Andrew R. Drake



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