LIMITED POWER OF ATTORNEY (REAL ESTATE)

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I/We,	Caroline Fernandez	of	County, State of _	<u>Indiana</u>	_, being at least 18							
years	of age and mentally competent, o	to hereby designate _	Ruth Mavronicles	0	f <u>Lake</u> County,							
State	of <u>Indiana</u> , a	as my true and lawful	attorney-in-fact.	. င်ာ								
l. <u>P</u>	POWERS AND PURPOSES			£								
	OWERS AND FURFUSES			•								
The above named attorney-in-fact shall have authority with respect to real property transactions pursuant to Ind. Code S 30-5												
5-2, p	ertaining to the transaction of the	real estate described	below, situated in	Lake County	, State of Indiana:							

LOT 78 IN THE ESTATES OF AUBURN MEADOW PHASE II, AN ADDITION TO THE TOWN OF SCHERERVILLE, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 92 PAGE 62, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA

45-11-08-351-Documentis

NOT OFFICIAL!

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the address of such real estate is commonly known as 1355 Hollyhock Lane, Schererville, Indiana 46375, (the "Real Estate") and shall be construed so as to effectuate this purpose. This authority shall include, by way if illustration and not limitation, the power:

To make, draw, and endorse promissory notes, checks or bills or exchange pertaining to the Real Estate and to waive demand, presentment, protest, notice of protest, and notice of non-payment of all such instruments;

To make and execute any and all contract pertaining to the Real Estate;

To receive and to demand all sums of money, cents, dues, accounts, bequests, interest and demands pertaining to the Real Estate which are now or shall hereafter become due or payable to us and to comprise, settle or discharge the same;

To bargain for, contract concerning, buy, sell and convey, exchange, encumber and in anyway and manner, deal with personal property located upon or pertaining to the Real Estate; and

To execute any and all documentation necessary to effect the transactions described above, including, but not limited to, closing statements, instruments of conveyance and supporting documentation, certifications, acknowledgments, and like instruments.

FIDELITY NATIONAL THLE COMPANY FB1500927

Fidelity-Highland Burnet FB1500927

## H. EFFECTIVE DATE AND TERMINATION

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Ē	3. My disabil	ity or incompet	tence (select app	propriate provi	sion): (shall)	(shall not) af	fect or termina	ite this Power o	f Attorney.
	C. This Powe	r of Attorney s	hall terminate:		4				
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1	ll. RATIFIC	ATION AND	IDENTIFICA	TION					
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C	cknowledged the contained are true	e execution of the e.	iblic in Salas 161 Salas ne foregoing Powe	l'Éðunty and St er of Attorney, a	nd who, having	been duly swor	oline Femandez n, stated that ar	ny representation	who s therein
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