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 LAI - AMAKAA ATMST EAA

SPECIAL AND LIMITED POWER OF ATTORNEY AND RELATED CONVENANTS

KNOW ALL MEN BY THESE PRESENTS:

For good and valuable consideration, the receipt of which is hereby acknowledged, the undersigned, in connection with the subservicing of reverse mortgage loans as defined in the Subservicing Agreement dated December 19, 2011 (herein collectively the "Subservicing Agreement") entered into between Urban Financial Group, Inc., whose name was changed to "Urban Financial of America, LLC" effective 11-26-13 and then to "Finance of America Reverse LLC" effective December 1, 2015, with an address of 8909 South Yale Drive, Tulsa, OK 74137, as Client (herein the "Principal"), and Celink, 3900 Capital City Blvd, Lansing MI 48906, as Subservicer (herein the "Subservicer"), the undersigned Kristen Sieffert as President of Principal, does herein constitute and appoin "Any Officer or Manager of Celink" (herein referred to collectively as "Attorneys-in-Fact" and individually as "Attorney-in-Fact") and each officer or manager approved by the Board of Directors of Celink individually a true and lawful Attorney-in-Fact for Principal (but only for the purposes set forth herein) and pursuant to the Subservicing Agreement hereby authorizes and empowers each such Attorney-in-Fact, for and in the name and stead of Principal to endorse, execute or deliver any and all documents of instruments of mortgage satisfaction or cancellation, or of partial or full release of instruments with respect to the reverse mortgage sof the Subservicing Agreement including, without discharge, and all other comparable loans, all in accordance with the terms limitation, the recording of filing with the appropriate public officials of such documents or instruments and the endorsement and deposit of any such documents or instruments in connection with the forcelesure of any loan, or the cantripley or receivership of the borrower of any loan.

In addition, this document authorizes and empowers the Subservicer with the ability to execute, acknowledge, seal and deliver any and all documents, deeds, transfers taxed declarations, certificates, escrow instructions, bills of sale, closing statements and any other documents or instruments whatsoever which are necessary, appropriate, or actured to transfer, sell or convey real property, defined as REO Property.

Capitalized terms used and not otherwise defined herein shall have the meanings ascribed to such terms in the Subsection Agreement.

Principal covenants and agrees that it stall, from time to time after the date bereof, at the request of Subservicer, execute instruments continuing all of the foregoing authority of the Attorneys-in-Fact or substitute Attorneys-in-Fact. The foregoing shall not be deemed to be breached by reason of any action of comission of any Attorney-in-Fact or such substitute Attorney-in-Fact as may be appointed assecunder.

Hold for: INDIANA TITLE NETWORK COMPANY 325 N MAIN STREET CROWN POINT, IN 46307 2016-57969-02

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time after the date bereof, at the

This Special and Limited Power of Attorney shall commence as of the date of execution hereof and shall continue in full force and effect until terminated, in writing, by the Principal.

Any reproduction copy of this signed original Special and Limited Power of Attorney shall be deemed to be an original counterpart of this Special and Limited Power of Attorney.

IN WITNESS WHEREOF, Principal has caused this instrument to be signed by its duly authorized officer on this 2000 day of 2000.

WITNESSED:

Finance of America Reverse LLC

By: Kristen Sieffert (Name)

Its: President

MOTARY ACKNOWLEDGEMENT

County of

Document is the property of

On the 30 they Irake County the year 2005 before me, the undersigned, a Notary Public in and for said State, personally appeared, Kosten Seffer 1, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(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 capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

After recording return to:

Celink

PO Box 40724

Lansing, MI 48901

Notary Signature

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STATE OF FLORIDA, COUNTY OF DADE

