STATE OF INDIANA AKE COUNTY FILED FOR RECORD MICHAEL B BROWN RECORDER

2020 May 21

10:17 AM

BF232020-00161

POWER OF ATTORNEY

(Made under Indiana Code § 30-5, as amended or replaced (the "Statute"))

I, VICTORIA GYFTAKIS, as principal, designate KATHERINE KOGLER to be my Attorney-in-Fact. If KATHERINE KOGLER fails to serve or ceases to serve as provided in the statute, I designate ATHANASIOS GYFTAKIS as my Successor Attorney-in-Fact. Any successor shall become my Attorney-in-Fact when the person first designated has failed or ceased to serve as specified in the Statute, or has declined to serve.

A. POWERS. According to the Statute, an Attorney-in-Fact has any power granted under Indiana Code § 30-5 if the power of attorney incorporates the power. Therefore, by referring to the language of the Statute describing powers, this Power of Attorney incorporates into it the powers listed here and confers general authority with respect to them, unless specifically limited in this Power of Attorney:

Real Property:	VE \$30-5-5-2	Gifts: CIAL!	IC § 30-5-5-9
Tangible Personal Prop			IC § 30-5-5-10
Bonds, Shares & Comm	nødit iEsnis ID § 301515eent	is takes produced two of	IC § 30-5-5-11
Retirement Plans:	tle \$3915e5@51	Lawin Maintenance:	IC § 30-5-5-12
Banking:		Military Service Benefits:	IC § 30-5-5-13
Business Operating:	IC § 30-5-5-6	Records, Reports & Stateme	ents: IC § 30-5-5-14
Insurance:	IC § 30-5-5-7	Estates:	IC § 30-5-5-15
Beneficiary:	IC § 30-5-5-8	All Other Matters:	IC § 30-5-5-19

Although the Statute grants powers with respect to health care (IC § 30-5-5-16 and IC § 30-5-5-17) and delegation (IC § 30-5-5-18), this Power of Attorney does not include them and they are excluded from the powers to be exercised by my Attorney-in-Fact.

In furtherance of these powers, I give my Attorney at Fact the power to act on my behalf and do for me and in my name those things which revalue to and necessary to effectuate the intent of this Power of Attorney, as fully as I could do myself. The powers granted in this Power of Attorney shall be considered limited so that my Attorney-in-Fact shall not have any power which would cause my Attorney-in Fact to be treated as the owner of any interest in my property and which would cause that property to be taxed as owned by the Attorney-in-Fact.

- B. RESERVATION OF POWER TO ACT AND REVOKE. I reserve in myself, however. the power to act on my own behalf and also to revoke or amend this Power of Attorney.
- C. <u>LIABILITY OF ATTORNEY-IN-FACT</u>. As permitted by IC § 30-5-9-5, I, as principal, specifically provide that my Attorney-in-Fact is liable only if my Attorney-in-Fact acts in bad faith; provided, however, my Attorney-in-Fact shall be liable for the negligent exercise of power granted in this Power of attorney if the exercise of such power involves self-dealing.
- **D.** SAFE DEPOSIT BOX. I give my Attorney-in-Fact power to enter any safe deposit box in my name either individually or jointly with any other person. I give the power also to remove property from or add property to any such box, and to relocate any such box within the banking institution or at another. Powers given are in addition to those incorporated into this Power of Attorney by reference.

(H 1820801701#2500

CHICAGO TITLE INSURANCE COMPANY

- **E. EFFECTIVE DATE AND DURATION.** This Power of Attorney shall be effective as of the date it is signed. This Power of Attorney is **not** terminated by my incapacity, or lapse of time. It is my intent that the powers granted in this Power of Attorney shall continue without interruption until my death unless previously revoked by me.
- **F.** <u>REVOCATION OF PRIOR POWERS</u>. Except Health Care Powers of Attorney or Appointment of Health Care Representatives, I revoke all powers of attorney I signed before the date of this Power of Attorney.
- **G. GUARDIAN.** If proceedings are initiated to appoint a guardian of my estate, I designate my Attorney-in-Fact to be appointed as the guardian of my estate.
- H. OTHER STATUTORY PROVISIONS. The inclusion or incorporation by reference of specific provisions or chapters of the Statute in this Power of Attorney is not intended to exclude any other appropriate or necessary provisions or chapters of the Statute, unless expressly excluded in this Power of Attorney.
- I. BINDING EFFECT. Any act or thing performed by my Attorney-in-Fact under this Power of Attorney binds me and my successors in interest, as the Statute provides.

IN WITNESS WHEREOF, I have signed this Power of Attorney on March 27, 2020.

VICTORIA GYEVAKIS
9079 Schillen Drive
St. John Indian 46373

STATE OF INDIANA

COUNTY OF LAKE

BEFORE ME, a Notary Public in and for said County and State, personally appeared **VICTORIA GYFTAKIS** who acknowledged the execution of the foregoing Power of Attorney on March 27, 2020.

KENT A JEFFIRS
Notary Public – Notary Seal
State of Indiana
Lake County
My Commission Expires Sept 28, 2024

Ken A. Jeffirs, Notary Public

Return to:

This instrument prepared by

Kent A. Jeffirs, Attorney at Law 104 W. Clark Street Crown Point, IN 46307