Total Fees: 25.00 By: KNK Pg #: 3 FILED FOR RECORD GINA PIMENTEL RECORDER

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## DURABLE POWER OF ATTORNEY

else Lynn Meric Velligen, I, LYNN M. VELLIGAN, do hereby appoint my daughter RADA A. VELLIGAN as my attorney to do the following acts and to execute the following powers. I intend that the same be construed in the broadest possible manner and not be limited to their strict legal or technical meaning.

- 1. To ask, demand, sue for, collect, recover and retrieve all sums of money, debts, dues, accounts, legacies, bequests, interest, dividends, annuities and demands whatsoever as are now or shall hereafter become due, owing, payable or belonging to me. To have, use and take all lawful ways and means in my name or otherwise for the recovery thereof, and to compromise and satisfy and discharge the same.
- 2. To make, seal and deliver; to bargain, contract, agree for, buy, sell, encumber and in any and every way and manner deal in and with tangible and intangible personal property. Without intending any limitation thereon, this power shall include the right to buy or sell securities, including the power to perform all obligations and take the benefit of all rights under any existing future contracts, as well as the power to execute additional future contracts.
- 3. To do and transact all and every kind of business of any nature and kind whatsoever.
- 4. To bargain, contract, agree for, purchase, receive and take lands, tements, hereditaments, and accept the seizing and possession of all lands and all deeds and other assurances, and to lease, let, denise, bargain, sell, release (either partial or full), convey, mortgage and hypothecate lands, tenements and hereditaments, upon such terms and conditions (including credit, secured or unsecured) and under such covenants as they shall think fit. To sign, seal, execute and deliver and acknowledge such deeds, leases, evidences of debt, releases and satisfactions of mortgages, either partial or full, judgments and other debts, and such other instruments in writing of full, judgments and other debts, and such other instruments in writing of whatever kind or nature as may be necessary or proper in the premises.
- 5. To attend to all tax matters for me, including any matters regarding Social Security, preparation of and signing off-Federal Income Tax Returns, any state tax returns, claims for any refund of taxes, whother Federal, State or Local, to attend to any tax litigation or tax hearings on my behalf.
- 6. To make gifts to herself and any of my descendants and to any charitable organization described in Sections 170(c) and 2522(a) of the Internal Revenue Code of 1986, ("Code"), as amended, provided that the aggregate value of all gifts made to any descendant in one calendar year shall not exceed the gift tax annual exclusion as provided in Section 2503(b) of the Code. This authority is not conditioned upon my eventual estate being subject to any possible estate tax.
- 7. To transfer assets to any trust that I have created or may hereafter create.
- To attend to all banking matters, including signing or endorsing of all checks or drafts. To enter into any safe deposit box that I might have, to both remove and add any contents, and close the box.

Amy

LAW OFFICES

JUGITERSON, SUNDHEIM

& ASSOCIATES, P.A.

CENTRAL PARKWAY

PROFESSIONAL PLAZA

612 SE CENTRAL PKWY

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- To attend to any insurance transactions, including the right to change beneficiaries.
- 10. To make any decisions regarding mental and physical medical trendent or non-treatment including, but not limited to, selection of physicians, facilities, use of drugs, decisions regarding surgery or decisions regarding use of artificial life support equipment. I further authorize my attorney to sign all consents, authorizations, waivers or other documents in connection therewith. It being my intent to give my attorney the broadest possible powers in connection with matters directly or indirectly related to my mental and physical medical treatment, and this power of attorney shall be construed liberally toward that objective. It is further my intent that my attorney in fact may make all health care decisions on my behalf, including, but not limited to, those set forth in Chapter 765, Florida Statutes (Health Greek).
- 11. To sell, mortgage, or lease my homestead property upon such terms and conditions as my attorney in fact deems appropriate. This power is intended to apply to my current homestead or any homestead that I may hereafter acquire.
- 12. The power to disclaim any interest that I may have in any property, real or personal.
- It is my intention to grant unto my attorney the power to do any and all things that I could do without limitation.
  - 14. This Power of Attorney covers after acquired property.
- 15. It is understood that the word "attorney" and all pronouns herein shall be singular if referring to one person only and shall be plural, jointly and severally, if referring to more than one person, and shall be masculine, feminine, or neuter, wherever the context implies or admits.
- 16. If more than one attorney is appointed herein, any is specifically authorized to exercise any and all of the above powers in his name alone without the joinder or consent of the other or others.
- 17. My attorney, when acting in good faith under the power of attorney, shall not be liable for any acts or decisions made by her.
- 18. This durable power of attorney is not affected by subsequent incapacity of the principal except as provided in Chapter 709.08, Florida Statutes.
- 19. This durable power of attorney shall be effective from the date hereof.
- 20. A revocation, partial or complete, termination, suspension or limitation of the power of attorney shall not be effective until written notice is served on my attorney or any third person relying on the power of attorney. Service may be by any form of mail that requires a signed receipt or by personal delivery as provided for service of process.
- Any person or entity dealing with my attorney may conclusively rely on an affidavit executed by my attorney indicating that this power of attorney has not been revoked.

XMV.

LAW OFFICES
NUCHTERSON, SUNCHEM
& ASSOCIATES, P.A.
CENTRAL PARRWAY
PROFESSIONAL PLAZA
612 SE CENTRAL PKWY
STHART FL 24924

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	22. All acts of my attorney done after the revocation of this power of attorney shall be valid and effectual in favor of any person or entity claiming the benefit thereof who relied upon this instrument and who had no knowledge of such revocation.
	I do hereby ratify and confirm all that my said attorney shall lawfully do or cause to be done by virtue of these presents.
	I do hereby revoke all powers of attorney heretofore made by me.
	15 IN WITNESS WHEREOF, I have hereunto set my hand and seal this day of April, 2014.
	Witnesses:    Harming   Million   Lynn M. Velligan and Eynn Marie Velligan   Printed name of witness
	Printed name of witness Lynn Marie Velligan
-	flow Nov
	Sharon Newman
ı	Printed name of witness
I	Filinted manie of whatses
I	STATE OF FLORIDA
	COUNTY OF MARTIN
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	The foregoing instrument was acknowledged before me this /5_day of April, 2014, by LYNN M. VELLIGAN? Aha Lynn Maric Volligan.
	/3 day of April, 2014, by LTNN N. VELLIGAR: WILL ESTITION OF THE STATE
I	(D) F-C1
	Thank your
Ì	Signature of Notary Public
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Ì	Selection (spread on Conditional Condition of Conditional Condition of Condition of Conditio
١	Print, type or stamp commissioned
ı	name of Notary Public
	Personally known or produced identification
	Personally known or produced identification
	Type of Identification Produced

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KTEKSON, SUK & ASSOCIATES, P.A. ROPESSIONAL PLAZA G12 SE CENTRAL PKWY STULBT FL 34994

This document prepared by: Frederick Sundheim

I affirm under the penalties for perjury, that I have taken reasonable care to reduct each social security number in this document, unless required required by law.

Frederick Sundheim