2008026127 00024
FORSYTH CO, NC FEE \$38.00
PRESENTED & RECORDED:

05-20-2008 10:35 AM
KAREN GORDON
REGISTER OF DEEDS
BY: PATSY RUTH DAVIS
DPTY

BK: RE 2833 PG: 844-852

LIMITED POWER OF ATTORNEY

Recording Requested by: LSI
When recorded return to:
Custom Recording Solutions
2550 N. Red Hill Ave.
Santa Ana, CA 92705
800-756-3524 Ext. 5011

Prepared By: Jason Potter

CRS: 4352942

APN: 3631 055

AND WHEN RECORDED MAIL TO

LIMITED POWER OF ATTORNEY

Caution: this is an important document. It gives the person whom you designate (your "Agent" also called "Attorney in Fact") broad powers for a specific transaction, to handle your property during a certain period of time, which may include powers to mortgage your real property with advance notice to you by web based closing. These powers will continue to exist even after you have become disabled or incompetent. This document does not authorize anyone to make medical or other health care decisions. You may execute a different document, a health care proxy to do this. If there is anything about this form that you do not understand, you should ask an attorney to explain it to you.

BE IT KNOWN, that Edward C Carr

THIS DOCUMENT IS FILED FOR RECORD BY FIDELITY NATIONAL TITLE INS. CO. AS AN ACCOMMODATION ONLY. IT HAS NOT BEEN EXAMINED AS TO ITS EXECUTION OR AS TO ITS EFFECT UPON THE TITLE.

whose address is

4270 Sewanee Dr

Winston Salem, NC 27106

has made and appointed, and by these presents does make and appoint the following persons who are employees of LSI, namely: Michael Martin, James Greene, Deanna Dixon, Hope Haley, Elise Yacovone, Shannon Obringer and/or Greg Perdziola each of whom may act separately, whose addresses are C/O LSI, at 700 Cherrington Parkway, Coraopolis PA 15108, my/our true and lawful attorney in fact (also called agent) for them and in their name, place and stead, for the following specific and limited purposes:

- (1) Refinancing of the Real Estate located at 4270 Sewanee Sr, Winston Salem, NC 27106, and to be refinanced with Wachovia Mortgage Charlotte-,
 - LSI Reference Number: 4352942
- (2) To mortgage, finance, refinance, hypothecate, assign, transfer, and in any manner deal with the real estate to effectuate the above referenced refinancing (which may also be called "banking transactions" under state statute);
- (3) To execute, acknowledge, and deliver escrow instructions, and all Closing Documents which including but not limited to: Notes, Deeds, Mortgages/Deeds of Trust, Subordinations, security instruments, riders, attachments and addenda, including any documents necessary or requested as part of this transaction by Title Insurer, Lender or the other parties to the transaction, those documents needed by governmental and taxing authorities, covenants, agreements and assignments of agreements, assignments of mortgages, assignments of deeds of trust, to secure the referenced indebtedness, lien waivers, encumbrance or waiver of homestead and any marital rights necessary to obtain the financing, settlement

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statements, truth in lending disclosures, loan applications, HUD 1 and other written instruments of whatever kind and nature, all upon such terms and conditions as said attorney in fact (also called agent) shall approve.

Further giving and granting said attorney in fact (also called agent), full power and authority to do and perform all and every act and thing whatsoever necessary to be done in and about the specific and limited premises (setout herein) as fully, to all intents and purposes, as might or could be done if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that said attorney in fact (also called agent) should lawfully do or cause to be done by virtue hereof.

This Power of Attorney shall become effective immediately, and shall not be affected by my subsequent disability, incapacity or lack of mental competence, except as may be provided otherwise by an applicable state statute. This is a Durable Power of Attorney. This Power of Attorney shall continue until the Mortgage/Deed of Trust is recorded in the appropriate office. I may revoke this Power of Attorney at any time by providing written notice to my Attorney in Fact (also called agent), however such revocation shall not be effective as to third parties acting in reliance upon this Power of Attorney if recorded, unless and until the revocation is similarly recorded in the same county and state registry or other established records for the recording of Powers of Attorney. This Power of Attorney is limited to a specific refinance, and the powers noted shall continue only through and including any post closing corrections, amendments and follow up procedures, but shall cease when the refinance and all post-closing matters are fully accomplished.

TO INDUCE ANY THIRD PARTY TO ACT HEREUNDER, I HEREBY AGREE THAT ANY THIRD PARTY RECEIVING A DULY EXECUTED COPY OR FACSIMILE OF THIS INSTRUMENT MAY ACT HEREUNDER, AND THAT REVOCATION OR TERMINATION HEREOF SHALL BE INEFFECTIVE AS TO SUCH THIRD PARTY UNLESS AND UNTIL ACTUAL NOTICE OR KNOWLEDGE OF SUCH REVOCATION OR TERMINATION SHALL HAVE BEEN RECEIVED BY SUCH THIRD PARTY, AND I FOR MYSELF AND FOR MY HEIRS, EXECUTORS, LEGAL REPRESENTATIVES AND ASSIGNS, HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS ANY SUCH THIRD PARTY FROM AND AGAINST ANY AND ALL CLAIMS THAT MAY ARISE AGAINST SUCH THIRD PARTY BY REASON OF SUCH THIRD PARTY HAVING RELIED ON THE PROVISIONS OF THIS INSTRUMENT.

Dated <u>3 - 20</u> , 200 <u>8</u> at	10:28 Am
Edward C. Can Edward C Carr	Partial Password 2942
Witness: Damy Jain printed name of witness: TAmmy Fain (if required)	Witness: Melody Smith printed name of witness: Melody Smith (if required)
Specimen signature of AGENT/Attorney in Fa	act:

Sta	te of <u>~~</u> C		_				
Cou	unty of Radingham	-	<u> </u>				
On		befo	ore me,			EUQ ng	, Notary Public
per	sonally appeared Edward	I C Carr					
0	personally known to me	- OR - 6	the per within he/she/ capacity instrum	son(s) wh instrumen they execu (ies), and ent the pe	ose nam t and ited the s that by h erson(s),	e(s) is/are acknowled ame in his is/her/thei or the er	ctory evidence to be exposerible to the described to the described to the sher/their authorized resignature(s) on the native upon behalf of the instrument.
Му	Commission Expires: <u>५-</u> ९	<u>0108-0</u>	WITNE	SS my har	D.E.	icial seal.	DONNA B EVA NOTARY PUBLIC Reckingham County, North My Commission Expires April
_			- OPT	IONAL '			
Tho	ough the data below is not r ld prevent fraudulent reatta	equired by la schment of th	w, it may is form.	prove valua	able to pers	sons relying	g on the document and
CAF	PACITY CLAIMED BY SIG	NEER		DES	SCRIPTIO	N OF ATTA	ACHED DOCUMENT
0	INDIVIDUAL CORPORATE OFFICE	R					
	TITLE(S)			_		TITLE OR TYPE	DF DOCUMENT
0	PARTNER(S) O	LIMITED GENERAL					
0	ATTORNEY IN FACT TRUSTEE					NUMBER O	F PAGES
0	GUARDIAN/CONSERV OTHER	ATOR		·			
						DATE OF D	OCUMENT
	INER IS REPRESENTING OF PERSON(S) OR ENTITY(IES)	G:					

Please ask notary to fill this out and send it with the completed document(s)

ATTENTION NOTARY:

PLEASE PROVIDE THE FOLLOWING INFORMATION

IN THE EVENT WE NEED TO CONTACT YOU:

NOTARY'S NAME: Donna B. Evans (Printed)
(Name of Notary's
Company if applicable) Wachouta Bank
NOTARY'S ADDRESS: 217 Turner On. (Work address if notarized at place of notary's employment) Residualle no 27520
Notary's ID #: <u>1995リコの8フ</u> (Required in State of Virginia & other States)
NOTARY'S DAY TIME
PHONE # & EXT. 336-342-6886

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Specimen signature of AGENT/Attorney in Fact:	2212

ACKNOWLEDGMENT OF ATTORNEY-IN-FACT

I, AGENT, have read the attached power of attorney and am the person identified as the attorney-in-fact (the "agent") for the principal. I hereby acknowledge that in the absence of a specific provision to the contrary in the power of attorney or in state law., when I act as agent:

I shall exercise the powers for the benefit of the principal.

I shall keep the assets of the principal separate from my assets.

I shall exercise reasonable caution and prudence.

I shall keep a full and accurate record of all actions, receipts and disbursements on behalf of the principal.

AGENT

Signature of Attorney-in-Fact

3-20-08

Date

State of	Pennsylvania	County of _	Allegherry
and acknowledge	ge said instrument is contained in office of the REGISTER OF DEF on theday ofexecuted under and by virtue of	benali Princi <u> </u>	ablic for said County and State, do _,agent/attorney in fact for pal, personally appeared before me eccuted the foregoing and annexed of the said pal, and that her authority to execute ant duly executed, acknowledged and unty of, State of, or filed herewith and that this given by said instrument granting him
I do further cert	ify that the said reg_Perd on of the foregoing and annexed	instrument for	Agent/Attorney in Fact, acknowledged or the purposes therein expressed forPrincipal.
Witness my har	nd and official seal, the <u>20</u> da	ay of _ Mar	a- 20 <u>08</u> .
(Official Se	COMMONWEALTH OF PENNSYLVANI Notarial Seal Magdia Esposito, Notary Public all) Moon Twp., Allegheny County My Commission Expires Oct. 4, 2009 Member, Pennsylvania Association of Notari	Notary Pub	lic O
My Commission	Expires:		
of trust or quit c	laim deed *******	used on docu	ment that is being recorded i.e. deed
State of North C			County
The foregoing of A notary Public Certified to be contact.	ertificate of of the county of orrect.	,	State of
This	day of		Registrar of Deeds.
		D	
		Deputy A	ssistant

APN: 3631 055

Order ID: 4352942

Loan No.: 4396970

EXHIBIT A LEGAL DESCRIPTION

The land referred to in this policy is situated in the State of NC, County of FORSYTH, City of WINSTON SALEM and described as follows:

Being known and designated as Lot Number 55, as shown on the Map of Shattalon Lake Estates, Section 1, recorded in Plat Book 21, Page 23 in the Office of the Register of Deeds of Forsyth County, North Carolina, reference to which is hereby made for a more particular description.

APN 3631 055

WITH THE APPURTENANCES THERETO.

APN: 3631 055