

**LIMITED POWER OF ATTORNEY FOR SALE OF REAL ESTATE**

BY THIS LIMITED POWER OF ATTORNEY, I, CHRISTINE EDWARDS, an unmarried widow, make, constitute, and appoint RICHARD E. CONNER, who is my attorney, and who I will refer to as my "Attorney", as my true and lawful attorney to act for me and in my name and place. I intend this instrument to be exercisable until revoked. **My Attorney's powers are limited to the following:**

**REAL PROPERTY:**

The powers of the Attorney include the right to contract for the sale, then sell, convey or transfer and execute all documents necessary to sell or transfer the following described property:

**Street Address of Property:**

1621 NW 26th Avenue, Fort Lauderdale, FL 33311

**Legal Description of Property, if known:**

Lot 6, Block 6, according to the Plat thereof, as recorded in Plat Book 40, Page 28, of the Public Records of Broward County, Florida; said lands lying and being in Broward County, Florida.

Real Property Tax ID No.: 4942-32-16-1170

**INDEMNIFY THIRD PARTIES:**

I hereby indemnify and hold harmless any and all third parties who rely on this Power of Attorney and who have no knowledge of its revocation or its having been amended.

This is NOT intended as a "Durable Power of Attorney" within the meaning of Section 709.08, Florida Statutes.

IN WITNESS WHEREOF, I have executed this power of attorney this 04 day of November, 2014.

Christine EDWARDS

Christine Edwards

Signed, sealed and delivered in the presence of:

Stephanie E Cooper

Name

1089 Allegood Road  
Stone Mountain GA 30083

Address

Shah Gang

Name

4095 Blackhawk Dr

Address

Stone Mountain GA 30083

STATE OF GEORGIA;  
COUNTY OF DEKALB;

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared CHRISTINE EDWARDS, who is personally known to me or who has presented a driver's license as identification, to me known to be the person described in and who executed the foregoing and acknowledged before me that he/she executed the same.

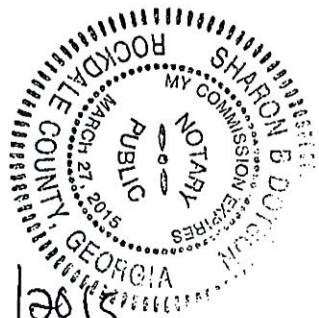
WITNESS my hand and official seal in the County and State last aforesaid on

4 day of November, 2014

Sharon B Dotson

Notary Public Signature

MY COMMISSION EXPIRES: 3/27/2015



SEAL