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Recording Requested by: LSPI Exchange Corp. and when recorded mail to:

Vernon E. Lovelace, Trustee of the Vernon E. Lovelace Living Trust 152 Snohomish Dr. La Conner WA 98257 Lot 66 Tinas coma

I AND TITLE COMPANY OF SKAGIT COUNTY

SPACE ABOVE THIS LINE FOR RECORDER'S USE \_\_\_\_

Grantor: LSPI Exchange Corp.

Grantee: \_Vernon E. Lovelace Trustee of the Vernon E. Lovelace Living Trust

Property Description: 111 Hillcrest Drive, Burlington, Washington Assessor's Tax Parcel ID#: 4755–000–066–0000

Assessor's Tax Parcel ID#:

## POWER OF ATTORNEY (Specific)

BY THIS POWER OF ATTORNEY LSPI EXCHANGE CORP. ("Principal"), does hereby appoint\_Vernon E. Lovelace, Trustee of the Vernon E. Lovelace Living Trust as it's true and lawful attorney. In Principal's name and for Principal's use and benefit, said attorney is authorized hereby:

- (1) to demand, sue for, collect and receive all money debts, accounts, rents, lease payments, refunds, rebates and compensation as are now or shall hereafter become due, payable, or belonging to Principal as a result of the operations and ownership of 111 Hillcrest Drive, Burlington, Washington (hereafter known as "REPLACEMENT PROPERTY") and to take all lawful means for the recovery thereof and to compromise the same and give discharges for the same;
- (2) to pay all debts, accounts, payments and obligations arising from the ownership by Principal of REPLACEMENT PROPERTY;
- (3) to execute, acknowledge and deliver contracts of sale and construction, closing instructions, leases, covenants, agreements and assignments of agreements.

THIS POWER OF ATTORNEY IS LIMITED TO ONLY THOSE MATTERS WHICH PERTAIN TO THE MANAGEMENT, OPERATION, DISPOSITION AND IMPROVEMENTS OF THE REPLACEMENT PROPERTY.

Giving and Granting to said attorney the power and authority to do all and every act and thing whatsoever requisite and necessary to be done relative to any of the foregoing as fully to all intents and purposes as Principal might or could do if personally present.

All that said attorney shall lawfully do or cause to be done under the authority of this Specific Power of Attorney is expressly approve.

By:

STATE OF CALIFORNIA ) COUNTY OF SANTA CLARA ) SS.

On May 3/, 00 before me, All Coats, a Notary Public in and for said County and State, personally appeared Day of Known to me (or proved to me on the basis of satisfactory evidence) to be the person(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 authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

Notary's Signature



Lot 66 "PLAT OF TINAS COMA" as per plat recorded on 8/11/00 under auditor's file number 200008110004 records of Skagit County Wash.



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