



Skagit County Auditor 1/31/2017 Page

1 of

\$75.00 3 3:01PM

WHEN RECORDED RETURN TO: Julia de Haan

220 W Mercer Street Suite W-430

Seattle, WA 98119

DOCUMENT TITLE(S):

Special Limited Power of Attorney

REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:

GRANTORS:

Lauren Gorter

Land Title and Escrow

GRANTEE:

Julia de Haan

ABBREVIATED LEGAL DESCRIPTION:

Unit & Slip 6, Fidalgo Marina Condo.

TAX PARCEL NUMBER(S): 4599-000-006-0005, P102511

SPECIAL LIMITED POWER OF ATTORNEY

I, LAUREN GORTER, resident of Lake Forest, Illinois, designate JULIA DE HAAN, resident of Seattle, King County, Washington, as my attorney-in-fact (referred to as the "Agent") on the following terms and conditions:

- 1. Authority to Act. The Agent is authorized to act for me under this Power of Attorney as described herein.
- 2. **Powers of Agent**. The Agent may act and exercise power, authority and control on my behalf, with regard to the following specific and limited purposes only:
 - To act on my behalf in all respects with regard to the sale of Unit G, Fidalgo Marina Condo located in Skagit County, Washington; and
 - b. To act on my behalf in dealings regarding Unit G, Fidalgo Marina Condo located in Skagit County, Washington.

I grant to my Agent the full rights, powers and authority to do, take, and perform each and every act or thing whatsoever necessary or proper to be done, in the exercise of any of the rights and powers granted in this instrument, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution or revocation, and by this instrument I ratify and confirm whatever act or thing that my Agent shall lawfully do or cause to be done by virtue of this Power of Attorney and the rights and powers granted by this instrument.

- 3. **Durability**. The rights, powers and authority of my Agent as granted in this Power of Attorney shall commence and be in full force and effect on December 1, 2016. This Power of Attorney shall expire March 1, 2017, or at an earlier date if revoked by me in writing.
- 4. Reliance by Third Parties. Third parties may rely upon the representations of the Agent as to all matters regarding powers granted to the Agent. No person who acts in reliance on the representations of the Agent or the authority granted under this Power of Attorney shall incur any liability to me or to my estate for permitting the Agent to exercise any power prior to actual knowledge that the Power of Attorney has been revoked or terminated by operation of law or otherwise.
- 5. Indemnification of Agent. No agent named in this Power of Attorney or substituted in this Power of Attorney shall incur any liability to me for acting or refraining from acting under this Power of Attorney, except for such agent's own misconduct or negligence. I agree to indemnify and hold harmless any agent named or substituted in this Power of Attorney for any court costs, civil judgments, or reasonable attorney fees that are incurred as a result of exercising the powers described herein.

6. Original Counterpa	arts. Photocopies of this signed Power of Attorney shall be
treated as original counterparts.	
DATEDAL: (S. L. S.D.	1 2016
DATED this / day of Dec	ember, 2016.
	LAVEL & GORTER
	Lauren Gorter
STATE OF Illnes)
STATE OF)) ss.
COUNTY OF Lake)
0 11 (VII)	
for the State of \(\overline{L} / \(\overline{L} \)	ber, 2016, before me, the undersigned, a Notary Public in and duly commissioned and sworn, personally appeared before me
	to be the individual described in and who executed the within
	dged that he signed the same as his free and voluntary act and
deed, for the uses and purposes there	in mentioned.
WITNESS my hand and office	cial seal this 6th day of December, 2016.
WITHLESS my hand and only	
OFFICIAL SEAL	Verginin B. Phitcheel
VIRGINIA G MITCHELL NOTARY PUBLIC, STATE OF ILLINOIS	NOTARY PUBLIC in and for the State of
My Commission Expires Oct 6, 2019	NOTARY PUBLIC in and for the State of Washington residing at 2566 N. Augusta Dr. Washington 10083
	My commission expires: 10/06/19
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