

**When recorded return to:**

Adriana Lara and Miguel A. Fernandez Marmolejo  
3004 Briarwood Circle  
Mount Vernon, WA 98273

Filed for record at the request of:



**CHICAGO TITLE**  
COMPANY OF WASHINGTON

425 Commercial St  
Mount Vernon, WA 98273  
Escrow No.: 620050222

**CHICAGO TITLE**  
620050222

**SPECIAL POWER OF ATTORNEY****Purchase/Encumber**

I, Miguel A. Fernandez Marmolejo, hereby appoint Adriana Lara as my true and lawful attorney for me and in my name and stead and for my use and benefit to execute promissory notes, bonds, mortgages, contracts, deeds of trust and any other instrument which may be necessary or proper to purchase and/or encumber the following described real property:

LOT 152, ROSEWOOD P.U.D, PHASE 2, DIVISION III, AS PER PLAT RECORDED ON MAY 16, 2005, UNDER AUDITOR'S FILE NO. 200505160223, RECORDS OF SKAGIT COUNTY, WASHINGTON. SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

Tax Parcel  
Number(s): P122870 / 4856-000-152-0000

Together with any personal property located thereon.

Giving and granting unto my said attorney in fact full authority and power to do and perform any and all other acts necessary or incident to the performance and execution of the powers herein expressly granted with power to do and perform all acts authorized hereby; as fully to all intents and purposes as the Grantor(s) might or could do if personally present. This Special Power of Attorney will cease and be of no further effect after the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, or six (6) months from the date hereof, whichever first occurs.

**WARNING: This power of attorney will result in another person having full right to encumber your real and personal property and obligate you to a debt. It is recommended that you obtain counsel from your attorney prior to execution of this document.**

Dated: December 22, 2021

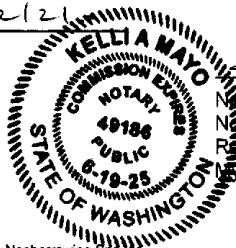
Miguel A. Fernandez Marmolejo

State of Washington

County of Skagit

I certify that I know or have satisfactory evidence that Miguel A. Fernandez Marmolejo is/are the person(s) who appeared before me, and said person(s) acknowledged that he/she/they signed this instrument and acknowledged it to be (his/her/their) free and voluntary act for the uses and purposes mentioned in this instrument.

Dated: 12/22/21



Name: Kellia Mayo  
Notary Public in and for the State of Washington  
Residing at: Secho Woolley WA  
My appointment expires: 6/19/25