

## WHEN RECORDED RETURN TO:

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Ryan N. Isakson 5217 Larabee Way Mount Vernon, WA 98273

LAND TITLE OF SKAGIT COUNTY 139362-O

DOCUMENT TITLE(S): Special Power of Attorney REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED: **GRANTOR:** Lioudmila Mochegova also known as Lioudmila Isakson **GRANTEES:** Ryan N. Isakson ABBREVIATED LEGAL DESCRIPTION: Lot 315, Skagit Highlands Div. V, Ph. 1. TAX PARCEL NUMBER(S): 4915-000-315-0000, P125527

## SPECIAL POWER OF ATTORNEY

PREAMBLE: This is a MILITARY POWER OF ATTORNEY prepared pursuant to Title 10, United States Code, § 1044b, and executed by a person authorized to receive legal assistance from the military services. Federal law exempts this power of attorney from any requirement of form, substance, formality, or recording that is prescribed for powers of attorney by the laws of a state, the District of Columbia, or a territory, commonwealth, or possession of the United States. Federal law specifies that this power of attorney shall be given the same legal effect as a power of attorney prepared and executed in accordance with the laws of the jurisdiction where it is presented.

## KNOW ALL PERSONS BY THESE PRESENTS:

That I, LIOUDMILA MOCHEGOVA also known as LIOUDMILA ISAKSON, currently residing in the Commonwealth of Massachusetts, by this document do make and appoint RYAN N. ISAKSON, whose present address is 5217 LARRABEE WAY, MOUNT VERNON, WA 98273, as my true and lawful attorney-in-fact to do and execute (or to act with persons jointly interested with myself therein in the doing or execution of) any or all of the following acts or things:

To bargain, seal, set over, assign and convey, using the standard of a reasonable seller under no compulsion to sell and engaging in an arm's length bargaining transaction, unto any person of my attorney-in-fact's choice, all my right, title and interest in any or all of that house and tract or parcel of land located in WASHINGTON, more particularly described as 5217 LARRABEE WAY, MOUNT VERNON, WA 98273, and to convey by ANY deed; to receive payment of the purchase money on my behalf for the property in any manner in which my said attorney-in-fact in fact shall deem wise, to transmit said monies to me, and to sign, seal, execute and deliver any and all deeds, contracts, or other documents necessary to carry out the foregoing.

To do any and all acts necessary or appropriate to encumber my real property by giving up a first, second or other mortgage on my property, or to give up a note in exchange for refinancing said property, or in any other way to encumber said property in exchange for a refinancing agreement, said property being located at 5217 LARRABEE WAY, MOUNT VERNON, WA 98273, and to sign, seal, execute, and deliver any and all deeds, contracts, or other documents necessary to carry out the foregoing; Further, I explicitly authorize my attorney-in-fact to utilize any entitlement that may be forthcoming from the Veterans Administration based upon my status as a member of the Armed Forces, AND NO OTHERS.

I HEREBY GIVE AND GRANT TO my said attorney-in-fact full power and authority to perform every act and thing whatsoever that is necessary or appropriate to accomplish the purposes for which this Power of Attorney is granted, as fully and effectually as I could do if I were present; and I hereby ratify all that my said attorney-in-fact shall lawfully do or cause to be done by virtue of this document.

PROVIDED, however, that all business transacted hereunder for me or for my account shall be transacted in my name, and that all endorsements and instruments executed by my said attorney-

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in-fact for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my said attorney-in-fact and the designation "attorney-in-fact."

I FURTHER DECLARE that any act or thing lawfully done hereunder by my said attorney-in-fact shall be binding on myself and my heirs, legal and personal representatives and assigns, whether the same shall have been done either before or after my death, or other revocation of this instrument, unless and until reliable intelligence or notice thereof shall have been received by my said attorney-in-fact.

FURTHER, this power of attorney shall remain in full force and effect until May 1, 2012, unless sooner revoked by me, provided, however, that such prior revocation shall be of no effect in respect to parties acting or things done in reliance hereon prior to receipt by them of such notice of revocation as may be prescribed by law.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on this day, 16th day of May, 2011.

LIOUDMILA MOCHEGOVA llso known as LIOUDMILA ISAKSON

WITNESS: ARLEEN WILSER

WITNESS: BENJAMIN DOSKOCIL

## **ACKNOWLEDGEMENT**

State of Connecticut )
) SS.: Groton

County of New London

Before me, a notary public, personally appeared LIOUDMILA MOCHEGOVA also known as LIOUDMILA ISAKSON, who, having produced a Uniformed Services Identification Card and a State/Government Identification Card, proved to me to be the identical person who is described herein, and who signed and executed the foregoing instrument on this day, 16th day of May, 2011, as a true, free, and voluntary act and deed, for uses, purposes, and considerations therein set forth.

J. M. SCHMAHL

Notary Public

J.M SCHMAHL Notary Public State of Connecticut My Commission Expires February 28,2014

My Commission Expires: 2/28/2014

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