



OFFICIAL RECORDS OF
PINAL COUNTY RECORDER
VIRGINIA ROSS

RECORDING REQUESTED BY:
First American Title Insurance Company

AND WHEN RECORDED MAIL TO:
James C. Owens
1794 West Desert Spring Way
San Tan Valley, AZ 85142

DATE/TIME: 08/26/2013 1552

FEE: \$9.00

PAGES: 4

FEE NUMBER: 2013-070014



POWER OF ATTORNEY - SPECIAL

File No. 435-5538819 (cab)

KNOW ALL MEN BY THESE PRESENTS: That **James C. Owens**, the undersigned (jointly and severally if more than one), hereby make, constitute and appoint **Nancy M. Owens** my true and lawful Attorney for me and in my name, place and stead and for my use and benefit covering real property described as follows:

LOT 1004, MORNING SUN FARMS UNIT-4A, ACCORDING TO THE PLAT OF RECORD IN THE OFFICE OF THE COUNTY RECORDER OF PINAL COUNTY, ARIZONA, RECORDED IN DOCUMENT NO. 2011-56705.

EXCEPT ALL COAL AND OTHER MINERALS AS RESERVED IN PATENT FROM THE UNITED STATES OF AMERICA

(a) To ask, demand, sue for, recover, collect and receive each and every sum of money, debt, account, legacy, bequest, interest, dividend, annuity and demand (which now is or hereafter shall become due, owing or payable) belonging to or claimed by me, and to use and take any lawful means for the recovery thereof by legal process or otherwise, and to execute and deliver a satisfaction or release therefore, together with the right and power to compromise or compound any claim or demand;

(b) To exercise any or all of the following powers as to real property, any interest therein and/or and improvements thereon: To contract for, purchase, receive and take possession thereof and of evidence of title thereto; to lease the same for any term or purpose, including leases for business, residence, and oil and/or mineral development; to sell, exchange, subdivide, grant or convey the same with or without warranty, covenant or restrictions; to mortgage, transfer in trust or otherwise encumber the same to secure payment of a note or performance of any obligation or agreement; and to accept the conveyance thereof as a joint tenant with a right of survivorship or as a community property with the right of survivorship with any other person or persons, including property wherein my said Attorney is one of the joint tenants or spouses;

(c) To exercise any or all of the following powers as to all kinds of personal property and goods, wares and merchandise, checks, choses in action and other property in possession or in action: To contract for, buy, sell, exchange, transfer, endorse and in any legal manner deal in and with the same; and to mortgage, transfer in trust, or otherwise encumber the same to secure payment of a note or performance of any obligation or agreement;

(d) To borrow money and to execute and deliver note therefore, with or without security; and to loan money and receive notes therefore with such security as he shall deem proper;

(e) To transact business of any kind or class and as my act and deed to sign, execute, acknowledge and deliver any deed, lease, assignment of lease, covenant, indemnity, agreement, mortgage, deed of trust, assignment of mortgage or beneficial interest under deed of trust, subdivision plat, extension or renewal of any obligation, subordination or waiver of priority, bill of lading, bill of sale, bond, note, receipt, check, evidence of debt, full or partial release of mortgage, judgment or other debt, and such other instruments in writing of any kind or class as may be necessary or proper in the premises;

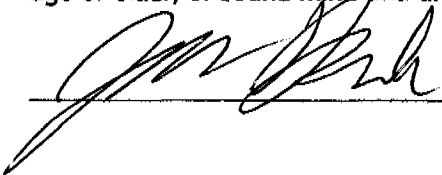
(f) This power shall not be affected by disability of the principal: All acts done by my Attorney pursuant to this power during any period of disability or incompetence or uncertainty as to whether I am dead or alive shall have the same affect and inure to the benefit of and bind me or my heirs, devisees and personal representative as if I were alive, competent and not disabled.

GIVING AND GRANTING unto my said Attorney full power and authority to do and perform all and every act and thing whatsoever requisite, necessary or appropriate to be done in and about the premises as fully to all intents and purposes as I might or could do if personally present, hereby ratifying all that my said Attorney shall lawfully do or cause to be done by virtue of these presents. When the context so requires, the masculine gender includes feminine or neuter, and the singular number includes the plural.

I, **James C. Owens**, the Principal, sign my name to this Power of Attorney this , and being first duly sworn, do declare to the undersigned authority that I sign and execute this instrument as my Power of Attorney and that I sign it willingly, or willingly direct another to sign for me, that I execute it as my free and voluntary act for the purposes expressed in the Power of Attorney and that I am eighteen years of age or older, of sound mind and under no constraint or undue influence.


James C. Owens

I, Jaspreet Brah, the Witness, sign my name to the foregoing Power of Attorney being first duly sworn do declare to the undersigned authority that the Principal signs and executes this instrument as his/her Power of Attorney and that he/she signs it willingly, or willingly directs another to sign for him/her, that I, in the presence and hearing of the Principal, sign this Power of Attorney as Witness to the Principal's signing and that to the best of my knowledge the Principal is eighteen years of age or older, of sound mind and under no constraint or undue influence.



STATE OF

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)ss.

County of MARICOPA

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SUBSCRIBED AND SWORN TO AND ACKNOWLEDGED before me by James C. Owens,
the Principal, and subscribed and sworn to before me

by JASPREET BRAH

the Witness, this 21st day of AUGUST, 20 13.

Signature

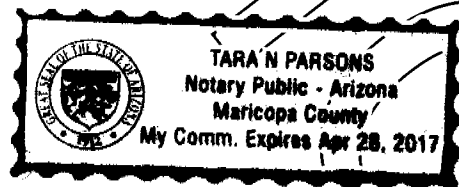
Tara N Parsons

My Commission Expires:

4/28/2017

(This area for official notarial

seal)



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Nancy M. Owens
1794 West Desert Spring Way
San Tan Valley, AZ 85142

AFFIDAVIT OF ATTORNEY IN FACT OR AGENT

(Power of Attorney Contains Disability Clause)

File No. 435-5538819 (st)


Nancy M. Owens, being first duly sworn, states under oath as follows:

That he/she is the duly appointed Attorney in Fact/Agent of **James C. Owens**.

That said Power of Attorney/Appointment of Agent has not been revoked or terminated and the same is presently in full force and effect.

That the undersigned has no knowledge or information regarding the death of the principal.

Document Date: **August 23, 2013**

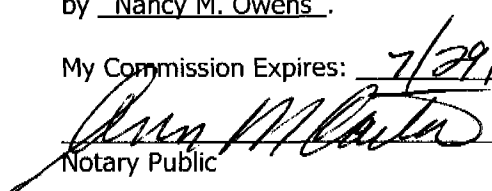

Nancy M. Owens

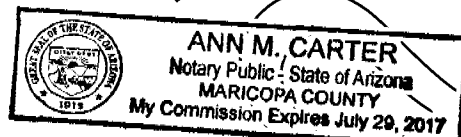
STATE OF **Arizona**

County of **MARICOPA**

Subscribed and sworn (affirmed) before me this 26th day of August, 2013
by Nancy M. Owens.

My Commission Expires: 7/29/2017


Notary Public



(This area for official notarial seal)