LIMITED POWER OF ATTORNEY

I/We

(the "PRINCIPAL(S)") with a mailing address of _____

______, do hereby make, constitute and appoint **TRADEMARK PROPERTY SOLUTIONS**, **LLC**, (the "Agent") as the True and lawful attorney-in-fact for **PRINCIPAL(S)**, giving and granting unto **AGENT** full power and authority to execute, sign, and initial any and all Documents, and conduct any and all acts necessary to consummate for sale, purchase and conveyance of the real property or personal property (the "TRANSACTION") known as:

 Resort
 Account No
 ,

 Season/Wk
 , Unit No
 , Points

 County
 , State
 , including, but not limited

 to, the power and authority to execute any instruments necessary to close
 TRANSACTION for the above referenced property and to allow AGENT to act in their

 stead at the time of Closing of TRANSACTION. (This LIMITED DURABLE POWER OF

 ATTORNEY shall not be affected by disability of PRINCIPAL(S) except as provided by

 applicable provisions of the state statutes. This instrument may also be construed by

 AGENT, at its sole discretion, to be a Non-Durable Power of Attorney without the statutory benefits of a Durable Power.)

Further, to perform all and every act and thing fully, and to the same extent as **PRINCIPAL(S)** could do if personally present, with full power of substitution and revocation, and **PRINCIPAL(S)** hereby ratifies and confirms that **AGENT** or any duly appointed substitute for **AGENT** shall lawfully do or cause to be done those acts authorized herein.

IN WITNESS WHEREOF, this instrument has been executed as of this day o	
Signed in the Presence of:	
Witness Signature #1	Witness Signature #2
Witness Name #1	Witness Name #2
Name of Principal #1	Name of Principal #2
Signature of Principal #1	Signature of Principal #2
State of	
County of	
On this day of	_, Notary Public, personally appeared
the person(s) whose name(s) is/are acknowledged to me that he/she/they	me on the basis of satisfactory evidence) to be e subscribed to the within instrument and executed the same in his/her/their authorized gnature(s) on the instrument the person(s) or the
NOTARY PUBLIC	STAMP
My Commission Expires:	