TO: Shelby County Probate Office

P.O. Box 825

Columbiana, AL 35051

RELEASE OF HOSPITAL LIEN

1. On 5/5/2017, Baptist Health System, Inc., whose address is 1000 1st Street North Alabaster, AL 35007, caused to be recorded in the office of the Probate Judge of Shelby County Probate Office, Alabama, in INST# 20170505000156520, a lien upon and against all rights of action, suits, claims, counterclaims or demands, etc. of patient, Anabely Rivera Sotelo, for the customary charges for care and treatment or transportation of patient Anabely Rivera Sotelo, on account of injuries giving rise to such claims and which necessitated such services, for furnishing treatment, care and maintenance to said injured person. The lien is hereby released by Shelby Baptist Medical Center who is the owner of the debt, obligation and lien.

2.	Therefore, in	consideration	of the foregoing,	the undersig	ned, Amanda	White,
authorized agent for	Shelby Baptist	Medical Cent	ter, authorizes and	d directs the	Shelby County	7
Probate Office Court	Clerk, to disc	harge the same	e of record.		•	

STATE OF MISSISSIPPI COUNTY OF ALCORN	BY:	Shelby Baptist Medical Center
COUNTIONALCOM		Amanda White

The foregoing statement was acknowledged and verified before me this Wednesday, March 21, 2018, by Amanda White the duly authorized agent of the above named health care provider for and on behalf of said hospital.

ENTITION AVA PATTERSON

MY COMMISSION EXPERES

NOTARY PUBLIC

20180330000106040 1/1 \$.00 Shelby Cnty Judge of Probate: AL 03/30/2018 11:48:47 AM FILED/CERT