20201117000526000 1/1 \$.00 Shelby Cnty Judge of Probate, AL 11/17/2020 03:04:43 PM FILED/CERT

TO: Shelby County Probate Office

P.O. Box 825

Columbiana, AL 35051

AUTHORITY TO RELEASE AND DISCHARGE HOSPITAL LIEN

You are hereby authorized and requested to release and discharge that certain Notice of Hospital Lien against claims of Titus Hunt, which Baptist Health System, Inc. caused to be recorded on 10/20/2020 as 20201020000477510 in the probate office of Shelby County Probate Office, in Alabama.

By:

Courtney B. Smith, Esq. (2987N58S)

Authorized Agent for Shelby Baptist Medical Center

FOR INQUIRIES CALL (855) 283-2887

State of Mississippi

County of Lowndes

The foregoing statement was acknowledged and verified before me this Monday, November 2, 2020, by Courtney B. Smith, Esq., the duly authorized agent of the above named health care provider for and on behalf of said hospital.

My commission expires:

SHEMMY E. WEST

Commission Expires, Nov. 16, 2022 NOTARY PUBLIC

Prepared by: Courtney B. Smith, Esq. 514 Waldron St. Corinth, MS 38834