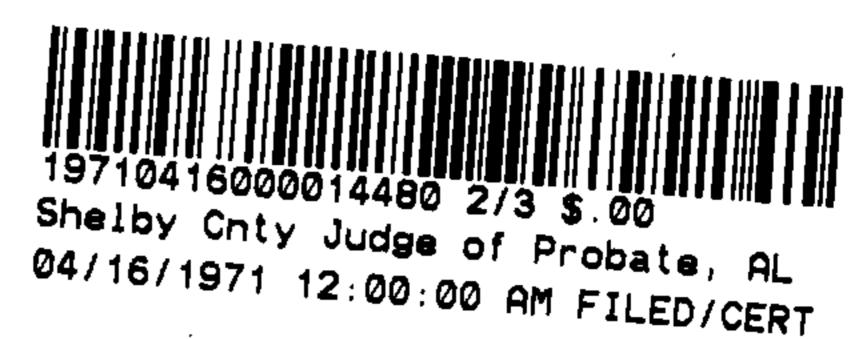


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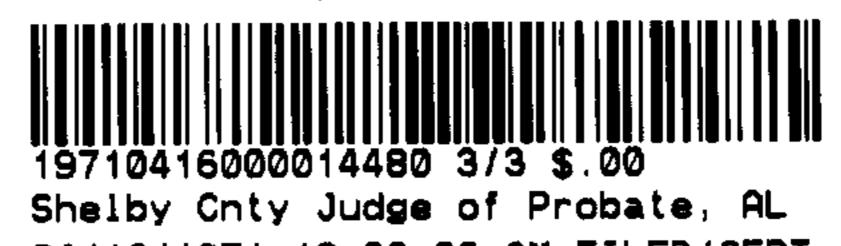
IN WITNESS WHEREOF, -/ have hereunto set___hand___and seal____, this the

WITNESS:



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Witness	(Sea
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	(Seal)
	(Seal)
IN WITNESS WHEREOF, the said <u>Ca</u>	
this instrument to be executed in its name by_	
its President and attested by Mrs. John 1	L. Cates , its Secretary, and its
corporate scal to be affixed, on this the 17	th day of March , its Secretary, and its Control Milk Hauling ela
Attest:	Cates Milh Hauby
Mas Jale	By John L. Cotate
Secretary.	Its President
STATE OF XXXXXXXXX	
County of XXXXXX	
I, XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
	, <u>8</u>
n and for said County in said State, hereby cer	tify that
gned to the foregoing instrument and who	known to me, acknowledged before me on this day
nat, being informed of the contents of the instru	
the day the same bears date.	mentexecuted the same voluntarily,
•	
Given under my hand and official seal this t	he, 19, 19

rate of	
ounty of	
T	<u> </u>
and for said County in said State, hereby certify	that whose name
	WILUSE HAILIE
igned to the foregoing instrument and whohat, being informed of the contents of the instrument in the day the same bears date.	texecuted the same voluntarily,
Given under my hand and official seal this the	day of, 19, 19
Given under my man organism and	
STATE OF	
)	
County of/	
I,,	8
in and for said County in said State, hereby certify	WILDSC HOUSE
in all to the feregoing instrument and who	known to me, acknowledged before me on this day
that being informed of the contents of the instrume	ntexecuted the same voluntarily,
. Al. Jan the neme books dots	·
on the day the same bears date. Given under my hand and official seal this the	day of, no, no,
17.47.41.6	
STATE OFALABAMA	
County of Shelby	
Country or	a MOTARY PUBLIC STATE AT LARGE
in and for said County in said State, hereby certify	a cornoration.
whose name as President of <u>Cates Milk Haul</u>	nown to me, acknowledged before me on this day ment, he, as such officer and with full authority,
that, being informed of the contents of the instru	mown to me, acknowledged below the full authority, ment, he, as such officer and with full authority, of said corporation.
executed the same voluntarily for and as the devi-	
Given under my hand and official seal this the	e_17th2_day of March
T Giveir and	1 Johnson
	NOTARY PUBLIC STATE AT LAKE
STATE OF	
Scounty of)	7) [1]
ae ounty or	
I, do horoby cer	tify that
n and for said County in said State, do hereby cer	is signed to th
whose name as who is known to me, ack	nowledged before me on this day that, being informe
. # 11 '' A AAA AMP	
executed the same voluntarily, on the day one	He Dealb date.
Given under my hand and official seal this th	eday of
Citton linder my hand and others bow.	
Given under my hand and official both	



04/16/1971 12:00:00 AM FILED/CERT