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**FULL SATISFACTION OF RECORDED LIEN**

SM-85-0719, which said judgment was recorded in the  
Office of the Judge of Probate of Shelby County,  
Alabama, in Book No. 034, Page No. 484, (and assigned to  
                     in Book No.              Page No.             ), and the  
undersigned does further hereby release and satisfy said judgment.

STATE OF ALA. SHELBY CO.  
I CERTIFY THIS  
INSTRUMENT WAS FILED

SIROTE, PERMUTT, FRIEND, FRIEDMAN,  
HELD & APOLINSKY, P.C.

By: bl: [Signature]  
Donald J. Sides

FOR SATISFACTIONS OF JUDGEMENTS ONLY

JUDGE OF PROBATE  
**STATE OF ALABAMA** )  
**JEFFERSON COUNTY** )

I, the undersigned authority, in and for said County, in said State, certify that Donald J. Sides, whose name as Attorney of Shelby County Hospital Board - dba Shelby Medical Center

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a corporation, is signed to the foregoing instrument, acknowledged before me on this day that, being informed of the contents of the instrument, he (as such Officer and with full authority), executed the same voluntarily (for and as the act of said corporation).

Given under my hand and official seal this the 14th day  
of November, 19 86.

My commission expires: 1-31-89

My commission expires: 1-31-89