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American States Insurance Company Indianapolis, Indiana

ese presents make, constitu			· · · · · · · · · · · · · · · · · · ·	·	<u> </u>
	LITELITAM I DO	NALDSON AND	WILLIAM M. T	ONSMEIRE	
				<u>. </u>	
		Jointly or Se		<u></u> -	
Mobile		and St	ate of	Alabama	to execute, acknowledge and
eliver any and all bonds, rec	ognizances, contracts o	of indemnity and other	er conditional or oblig	atory undertaking	s, provided,
however, that the	nenal sum of	any one such	instrument	executed h	ereunder shall
· · · · · · · · · · · · · · · · · · ·			し しゅうめん いってん むろわろびし	witha Precinetii :	sealed with the common seal o
ne Corporation and duly attes Power of Attorney is executed Insurance Company, which re "The Chairman of the Secretary or any Ass and Attorneys-in-Fac	ted by its Secretary, here I and may be revoked pure Board, the President sistant Secretary of the Cott as the business of the	or any Vice-Preside Corporation, to appoint Corporation, to appoint Corporation may record to appoint the Corporation of the Co	hority granted by Second shalt have power, nt Resident Vice-Presquire or to authorize a	tion 7.07 of the B by and with the sidents, Resident any one of such p	y-Laws of the American State concurrence with the Assistant Secretaries ersons to execute, on
ssistant Secretary and its c			4th day o	Tos	ne
			AMERI©	(N)STATES INSI	JRANCE COMPANY
. D. 19 <u>85</u>	1101	/		<i>//</i>	T Whele
SEAL)	West helds	3	By	Assiste	nt Vice-President
ATTEST:/_////	Assistant Secretary				
STATE OF INDIANA } SOUNTY OF MARION }	S:				
On this 4th	day of	June		A. D., 19 85	before me personally car
	lanson T. Abel				, to me known, w
being by me duly sworn, ack	nowledged the execution	n of the above instru	ment and did depose It the seal affixed to the and that he signed	and say; that he e said instrument i his name thereto	is a Vice-President of Americ s such corporate seal; that it w under like authority. And sa
Alanson T. Abel	turther said	that he is acquainted	with Gilbert	t Taylor	and knows him to be t
Assistant Secretary of said	Corporation; and that he IISSION EXPIRES	executed the above	e instrument.		
B/LY 1 1 193 M.					. .
·	ary 5, 1989		carac	m Stra	A State of the Sta
Febru My (STATE OF INDIANA)	Commission Expires SS:		Carel	Notary Pi	ublec
STATE OF INDIANA STATE OF INDIANA COUNTY OF MARION Gilbert Tay the above and foregoing is a is still in full lorce and effect This Certificate may be INSURANCE COMPANY w "All policies and of president or a vice	Commission Expires SS: ylor, the true and correct copy of it. signed and sealed by t which reads as follows: ther instruments of insur ce-president and the s	a Power of Attorney, acsimile under and brance issued by the Coretary or an assistative of the Corporation	of AMERICAN STATE executed by said AMI oy the authority of Section shall be stant secretary, who ion, may be fact that any	ES INSURANCE (ERICAN STATES ction 8.03 of the li igned on behalf of se signatures, if s. Such signature	COMPANY, do hereby certify INSURANCE COMPANY, was of AMERICAN STATE the Corporation by the the instrument is duly and facsimiles thereof have ceased to be such