

FULL SATISFACTION OF RECORDED LIEN

D/B/A/ Shelby Medical Center acknowledges full payment of
the indebtedness secured by that certain judgment in the case
Shelby County Health Care Authorities
of D/B/A/ Shelby Medical Center V. Mary F. Killingsworth

IN WITNESS WHEREOF, the undersigned, Attorney, has caused these present to be executed this the 18th day of December, 19 91.

STATE OF ALA. SHELBY CO.
I CERTIFY THIS
INSTRUMENT WAS FILED
JUN 14 1967

91 DEC 27 AM 11:47

STATE OF ALABAMA

JEFFERSON COUNTY)

SIROTE & PERMUTT, P.C.

BY: [Signature], Attorney

I, the undersigned authority, in and for the said county, in said State, certify that the above signed Attorney of Shelby County Health Care Authorities D/B/A/ Shelby Medical Center, a corporation, is signed to the foregoing instrument, acknowledged before me on this day, 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
18th day of December 19 91.

THIS INSTRUMENT WAS PREPARED BY:

SIROTE & PERMUTT, P.C.
2222 Arlington Avenue South
Post Office Box 55727
Birmingham, Alabama 35255

Janet M. Pach
Notary Public

My commission expires: 10-2-95