STATE OF ALABAMA*
JEFFERSON COUNTY*

FULL SATISFACTION OF RECORDED LIEN

JEFFERSON COUNTY*	1866 FU	IL SATISFACTION OF RECORDED LIEN
Know All Men By These		undersigned, MANLY & MANLY, Attys,
		cured by that certain judgment Recorded
in the office of the Judg		
Book No	368 Page No.	and the undersigned
does further hereby relea	se and satisfy said j	udgment in favor of:
MEDICAL DIAGNOSTIC (case #SM 91-08044,	CLINIC, P.A. v. Will District Court of	Jefferson County, Ala., civil div)
In Witness Whereof,	the undersigned	, has caused these
presents to be executed t	His 16th day of	JANUARY , 1992.
386rag 342		MANLY & MANLY, Attys 205 20th Street N, Rm 833 Birmingham, ALA 35203 ph: 1-205-251-8151 By:
• •		
STATE OF ALABAMA* JEFFERSON COUNTY*		CORPORATE ACKNOWLEDG-ILIVE
JEFFERSON COUNTY*	, a Notary Public in a	CORPORATE ACKNOWLEDGILLAT and for said County in said State,
JEFFERSON COUNTY*		nd for said County in said State,
I, the undersigned, hereby acknowledge that	Roy H. Manly,	nd for said County in said State, Ir. whose name as attorney of med to the foregoing instrument, and
I, the undersigned, hereby acknowledge that MEDICAL DIAGNOSTIC Country who is known to me, acknown to the ackno	Roy H. Manly.	and for said County in said State, Ir. , whose name as attorney of med to the foregoing instrument, and this day that, being informed of the
I, the undersigned, hereby acknowledge that MEDICAL DIAGNOSTIC C who is known to me, acknown to me, acknown to the instruments of the instruments.	Roy H. Manly, is signowledged before me on ent, he, as such attor	nd for said County in said State, Ir., whose name as attorney of med to the foregoing instrument, and this day that, being informed of the mey and with full authority, executed
I, the undersigned, hereby acknowledge that MEDICAL DIAGNOSTIC C who is known to me, acknown to the instrum	Roy H. Manly, is signowledged before me on ent, he, as such attor	and for said County in said State, Ir. , whose name as attorney of med to the foregoing instrument, and this day that, being informed of the mey and with full authority, executed aid professional association.
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I, the undersigned, hereby acknowledge that MEDICAL DIAGNOSTIC C who is known to me, acknown the same voluntarily for the same voluntarily for Given under my hand a new to make the same voluntarily for the same voluntar	Roy H. Manly, is signowledged before me on ent, he, as such attor	and for said County in said State, Ir. , whose name as attorney of med to the foregoing instrument, and this day that, being informed of the mey and with full authority, executed aid professional association.