| STATE OF ALABAMA) FULL SATISFACTION OF RECORDED LIEN |
|--|
| JEFFERSON COUNTY) |
| KNOW ALL MEN BY THESE PRESENT, That the undersigned, |
| Attorney for Shelby County Hospital Board DBA Shelby Medical Center |
| acknowledges full payment of |
| the indebtedness secured by that certain judgment in the case Shelby County Hospital Board of dba Shelby Medical Center v Sam H. Shaw & Marlene B. Shaw |
| SM 87 1128 , which said judgment was recorded in the |
| Office of the Judge of Probate of Shelby County, |
| Alabama, in Book No. 147 , Page No. 382 , (and assigned to |
| |
| in Book No), and the |
| undersigned does further hereby release and satisfy said judgment. |
| IN WITNESS WHEREOF, the undersigned, Attorney, has |
| caused these present to be executed this the $\frac{12\text{th}}{}$ day of |
| February , 19 93 . |
| |
| SIROTE & PERMUTT, P.C. |
| BY: Meal, Jr. Attorney for Creditor |
| STATE OF ALABAMA) |
| STATE OF ALABAMA) O2/12/1993-04191 JEFFERSON COUNTY) 11:58 AM CERTIFIED |
| I, the undersigned authority, in and for the said county, in said State, certify that the above signed Attorney of Shelby County Hospital Board dba 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 $\frac{12th}{day}$ of $\frac{February}{day}$ 19 $\frac{93}{day}$. |
| THE THETHERM WAS DEEDADED BY. |

Post Office Box 55727

Birmingham, Alabama 35255 Row Moore

P.O. Box \$40

Chilina, Al 35043