

STATE OF ALABAMA)
JEFFERSON COUNTY)

FULL SATISFACTION OF RECORDED LIEN

KNOW ALL MEN BY THESE PRESENTS, that the undersigned, Attorney
Shelby County Health Care Authorities
for D/B/A/ Shelby Medical Center acknowledges
full payment of the indebtedness secured by that certain judgment
in the case of Shelby County Health Care Authorities

D/B/A/ Shelby Medical Center V. James H. Jones, which said
SM78-994
judgment was recorded in the Office of the Judge of Probate of
Shelby County, Alabama, in Book No. 244, Page No. 515,
(and assigned to _____ in Book No. _____, Page No.
_____), and the undersigned does further hereby release and satisfy
said judgment.

Inst # 1993-16462

IN WITNESS WHEREOF, the undersigned attorney has caused these
presents to be executed this the 20th day of July, 1992.

SIROTE & PERMUTT, P.C.

By: [Signature] Attorney

STATE OF ALABAMA)
JEFFERSON COUNTY)

I, the undersigned authority in and for said County, in said
State, certify that the above-signed attorney of Shelby County Health Care Au-
thorities D/B/A/ Shelby, a corporation, whose name is signed to the
Medi-foregoing instrument, acknowledged before me on this day, that
cal being informed of the contents of the instrument, he, as such
Cen- officer and with full authority, executed the same voluntarily for
ter and as the act of said corporation.

Given under my hand and official seal this the 20th day of
July, 1992.

THIS INSTRUMENT WAS PREPARED BY:

SIROTE & PERMUTT, P.C.
2222 Arlington Avenue S.
P.O. Box 55727
Birmingham, AL 35255-5727
(205) 933-7111

[Signature]
Notary Public
My Commission Expires: 11-21-95

06/08/1993-16462
11:38 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
001 MCD 6.50