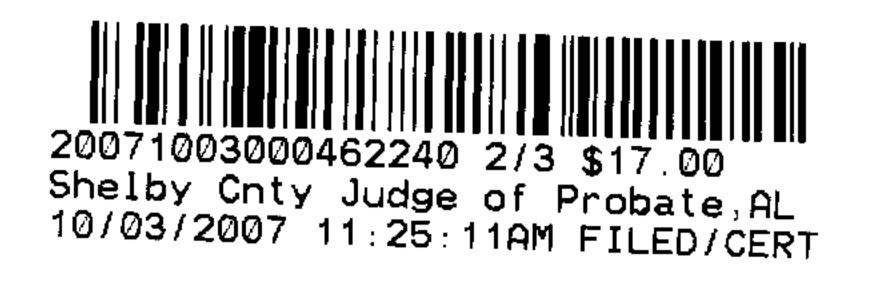


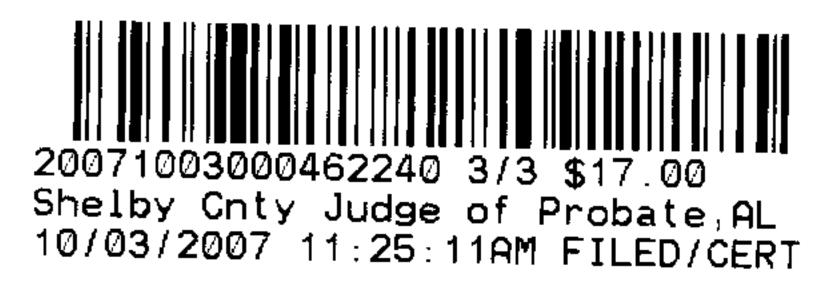
General Power of Attorney (with Durable Provision)

NOTICE: THIS IS AN IMPORTANT DOCUMENT. BEFORE SIGNING THIS DOCUMENT, YOU SHOULD KNOW THESE IMPORTANT FACTS. THE PURPOSE OF THIS POWER OF ATTORNEY IS TO GIVE THE PERSON WHOM YOU DESIGNATE (YOUR "AGENT") BROAD POWERS TO HANDLE YOUR PROPERTY, WHICH MAY INCLUDE POWERS TO PLEDGE, SELL OR OTHERWISE DISPOSE OF ANY REAL OR PERSONAL PROPERTY WITHOUT ADVANCE NOTICE TO YOU OR APPROVAL BY YOU. YOU MAY SPECIFY THAT THESE POWERS WILL EXIST EVEN AFTER YOU BECOME DISABLED, INCAPACITATED OR INCOMPETENT. THIS DOCUMENT DOES NOT AUTHORIZE ANYONE TO MAKE MEDICAL OR OTHER HEALTH CARE DECISIONS FOR YOU. IF THERE IS ANYTHING ABOUT THIS FORM THAT YOU DO NOT UNDERSTAND, YOU SHOULD ASK A LAWYER TO EXPLAIN IT TO YOU. YOU MAY REVOKE THIS POWER OF ATTORNEY IF YOU LATER WISH TO DO SO.

TO ALL	PERSONS	be it kno	that I, Wanda Herring Cagle + Road, Hoover, Alabama 35244
the unde	ersigned G	rantor (hei	reinafter Principal), do hereby make and grant a general power of attorney to
Jes	slynr	Cagle	and appoint said individual as my Attorney-in-Fact/Agent. Alabama 35242
and do t	hereupon	constitute	and appoint said individual as my Attorney-in-Fact/Agent. Hyabama 35243—
If my Aa	ent is unak	ale to servi	e for any reason, I designate <u>Jennifer Caale Travis</u>
of 230	9 400	l land C	ivole Birmingham, Alabama 35242, as my successor Agen
-	-	_	nall act in my name, place and stead in any way that I myself could do, if I were personally present matters, to the extent that I am permitted by law to act through an agent:
			mantere, to the entertain permitted by fact to det in edgin an agenti
		•	write his or her initials in the corresponding blank space of each box below with respect to each
		_	gh (N) below for which the Principal wants to give the agent authority. If the blank space within ivision is NOT initialed, NO AUTHORITY WILL BE GRANTED for matters that are included in that
	, i		ower withheld.)
WHC	,]	(A)	Real estate transactions
WHO		(B)	Tangible personal property transactions
JUHC		(C)	Bond, share and commodity transactions
JWHC -	.]	(D)	Banking transactions
180HC		(E)	Business operating transactions
WHC		(F)	Insurance transactions
[WHC	<u>•</u>]	(G)	Gifts to charities and individuals other than Attorney-in-Fact/Agent
- 60 140	-	•	(If trust distributions are involved or tax consequences are anticipated,
			consult an attorney.)
[WHC	_]	(H)	Claims and litigation
WHC	/]	(I)	Personal relationships and affairs
[]	(J)	Benefits from military service



WHC]	(K)	Records, reports and statements				
YWC]	(L)	Full and unqualified authority to foregoing powers to any person of	my Attorney-in-Fact/Agent to do or persons whom my Attorney-i	elegate any or all of the in-Fact/Agent shall select		
[WHC]	(M)	Access to safe deposit box(es)				
(WHC)	(N)	All other matters				
Durable Prov	/ision:					
[W#C]	(0)	O) If the blank space in the block to the left is initialed by the Principal, this power of attorney shall not be affected by the subsequent disability or incompetence of the Principal.				
Other Terms:			<u>. </u>	· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·						
My Attorney-in capacity consist acts so underta	tent with my	hereby accepts this appointment subject best interests as he or she in his or her	t to its terms and agrees to act an best discretion deems advisable,	nd perform in said fiduciary and I affirm and ratify all		
EXECUTED CO HEREOF SHALI SUCH REVOCA MY HEIRS, EXE ANY SUCH THI	PY OR FACS L BE INEFFE ATION OR TE ECUTORS, LE IRD PARTY F	RTY TO ACT HEREUNDER, I HEREBY ASIMILE OF THIS INSTRUMENT MAY ACTIVE AS TO SUCH THIRD PARTY UNLERMINATION SHALL HAVE BEEN RECESSAL REPRESENTATIVES AND ASSIGNSTROM AND AGAINST ANY AND ALL CLEARTY HAVING RELIED ON THE PROVI	THEREUNDER, AND THAT REVOCESS AND UNTIL ACTUAL NOTICE IVED BY SUCH THIRD PARTY, AND HEREBY AGREE TO INDEMNIFY AIMS THAT MAY ARISE AGAINST	CATION OR TERMINATION OR KNOWLEDGE OF D I FOR MYSELF AND FOR AND HOLD HARMLESS		
Signed under s	eal this	24day of	eptember			
Signed in the p	resence of:					
Vitness Vitness	- M.	Mink	Grantor (Principal) Attorney-in-Fact/Agent	t. Cagle		



State of Alabama)	10/03/200/ 11:25:11AM FILE
County of	
$\mathbf{O}(M)$	\sim \sim \sim
On Sept. 26, 2007, before me, Mary	Collay
appeared <u>Jianda Herring</u> Cagee	, personally known to me (or proved
to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is	
instrument and acknowledged to me that he/she/they executed the same in his/	•
and that by his/her/their signature(s) on the instrument the person(s), or the enti-	ty upon behalf of which the
person(s) acted, executed the instrument.	
WITNESS my hand and official seal.	
Δ	
Mary Cooley	
Signature of Notary State State Community Comm	
AffiantKnown Produced ID	
Type of ID	
(Seal)	

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