

STATE OF ALABAMA)
OFFICE OF THE JUDGE OF PROBATE)
COUNTY OF Shelby)

NOTICE OF AMENDED HOSPITAL LIEN

Amending lien filed on 2/11/08 via Doc # 20080211000056640

Notice is hereby given by Shelby Baptist Medical Center located at 1000 First Street North, Alabaster, AL 35007, operated by Baptist Health System located at 833 Princeton Avenue, SW, POB III, Suite 300, Birmingham, AL 35211, that Shelby Baptist Medical Center has furnished reasonable and necessary hospital care, treatment and/or maintenance to:

Jennifer E. Lutz P O Box 215 Maylene, AL 35114-0215

from 10/31/2007 to 10/31/2007 and that the amount due for the services is \$15,597.00.

The person(s), firm(s), or corporation(s) claimed by the patient or his/her representative to be liable for damages arising from the illness or injuries for which the patient received health care services are as follows:

Alfa 1808 Gadsden Highway Suite 132 Birmingham, AL 35235 Claim # (if known): A81201759

A lien is hereby created by the hospital upon any and all actions, claims, counterclaims, and demands accruing to the patient on account of the injuries which necessitated such hospital care and upon all judgments, settlements, and settlement agreements entered into on account of the injuries which necessitated such hospital care, all in accordance with the provisions of Alabama Code Annotated §35-11-370, et seq.

Prepared By:

Cindy R. Collins

Medical Reimbursements of America, LLC

o/b/o Shelby Baptist Medical Center

Shelby Baptist Medical Center,

425 Duke Dr., Suite 475 Franklin, TN 37067 (615) 963-3871

STATE OF TENNESSEE COUNTY OF WILLIAMSON

The foregoing statement was acknowledged and verified before me, on January 7, 2009, by Cindy R. Collins, the duly authorized agent of Shelby Baptist Medical Center, for an on behalf of said hospital...,

My Commission Expires:

3/7/10

Notary Public STATE

OF

TENNESSEE

NOTARY

PUBLIC

My Commission Expires MAR. 7, 2010