

DUPLICATE

ALABAMA MEDICAID AGENCY

STATE OF ALABAMA LIEN RELEASE

SHELBY COUNTY

KNOW ALL MEN BY THESE PRESENTS, that WHEREAS the State of Alabama, Alabama Medicaid Agency, is the holder of a lien on certain property which lien was given by Louise Jones, lienor(s), which lien is recorded in 20040205000060720 in the Probate Court of County, Alabama and that said lien is due to be released.

NOW THEREFORE, for and in consideration of the sum of \$0.00 and other good and valuable consideration, paid to the Alabama Medicaid Agency on or about 07/01/2004, said lien is hereby declared to be fully released and satisfied as to the lienor and his/her heirs/assigns.

IN WITNESS WHEREOF, the State of Alabama, Alabama Medicaid Agency, has caused this release to be executed by its Legal Counsel, who has the authority to execute the same on its behalf on this the <u>26th</u> day of <u>February</u>, <u>2014</u>.

STATE OF ALABAMA

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MONTGOMERY COUNTY

Alabama Medicard Office

(334) 242-5000

I, <u>Cynthia L Byrd</u>, a notary public, in and for said County in said State, hereby certify that <u>Tammy Hudson-Adams</u>, whose name as Attorney, Alabama Medicaid Agency, is signed to the foregoing conveyance and who is known to me, acknowledged before me on this day that, being informed of the contents of the conveyance, she, in her capacity as Attorney, executed the same voluntarily on the day the same bears date.

Given under my hand this the 26th day of February, 2014

NOTARY PUBLIC Commission Expires: 12/4/2015