

**DURABLE POWER OF ATTORNEY**

**20160607000196050**

**06/07/2016 01:16:48 PM**

**POA 1/4**

STATE OF ALABAMA)

SHELBY COUNTY)

KNOW ALL MEN BY THESE PRESENTS, which are intended to constitute a Durable Power of Attorney, that I, **Ali Motazed**i, the undersigned, of the County of Shelby, State of Alabama, do hereby make, constitute and appoint my beloved wife, **Shahin Motazed**i, of the County of Shelby, State of Alabama, my true and lawful Attorney in Fact, for me and in my name, place and stead, and on my behalf and for my use and benefit.

To exercise or perform any act, power, duty, right or obligation whatsoever that I now have, or may hereafter acquire the legal right, power or capacity to exercise or perform, in connection with, arising from, or relating to any person, lien transaction, thing, business property, real or personal, tangible or intangible, or whatsoever;

To request, ask, demand, sue for, recover, collect, receive and hold and possess all such sums of money, debts, dues, commercial paper, checks, drafts, accounts, deposits, legacies, bequests, devises, notes, interests, stock certificates, bonds, dividends, certificates of deposits, annuities, pension and retirement benefits, insurance benefits and proceeds, any and all documents of title, choses in action, personal and real property, tangible and intangible and property rights, and demands whatsoever, liquidated or unliquidated, as now are, or shall hereafter become, owned by me, or due, owing, payable, or belonging to, me or in which I have or may hereafter acquire interest, to have, use, and take all lawful means and equitable and legal remedies, procedures and writs in my name for the collection and recovery thereof, and to adjust, sell, compromise and agree for the same, and to make, execute and deliver for me, on my behalf, and in my name, all endorsements, acquittances, releases, receipts, or other sufficient discharges for the same;

To lease, purchase, exchange and acquire and to agree, bargain and contract for the lease, purchase, exchange and acquisition of, and to accept, take, receive and possess any real or

personal property whatsoever, tangible or intangible or interest thereon, on such terms and conditions, and under such covenants, as my said Attorney in Fact shall deem proper;

To maintain, repair, improve, manage, insure, rent, lease, sell, convey, subject to liens, mortgage, subject to deeds of trust, and hypothecate, and in any way or manner deal with all or any part of my real or personal property whatsoever, tangible or intangible, or any interest therein, that I now own or may hereafter acquire, for me, in my behalf, and in my name and under such terms and conditions, and under such covenants, as my said Attorney in Fact shall deem proper;

To conduct, engage in, and transact any and all lawful business of whatever nature or kind for me, on my behalf, and in my name;

To make, receive, sign, endorse, execute, acknowledge, deliver, and possess such applications, contracts, agreements, options, covenants, conveyance, deeds, trust deeds, security agreements, bills of sale, leases, mortgages, assignments, insurance policies, bills of lading, warehouse receipts, documents of title, bills, bonds, debentures, checks, drafts, bills of exchange, letters of credit, notes, stock certificates, proxies, warrants, commercial paper, receipts, withdrawal receipts and deposits instruments relating to accounts or deposits in, or certificate of deposit of, banks, savings and loan associations, credit unions, or other financial institutions or associations, proofs of loss, evidence of debts, releases, and satisfaction of mortgages, liens, judgments, security agreements and other debts and obligations and such other instruments in writing of whatever kind and nature as may be necessary or proper in the exercise of the rights and powers herein granted;

To make health care decisions for me; provided, however, that this particular power shall exist only when I am unable, in the judgment of my attending physician, to make those health care decisions. My Attorney in Fact shall have the power to make health care decisions on my behalf, including making decisions regarding my medical or domiciliary care, including admissions to hospitals or other institutions or placement in a nursing home, to consent to, to refuse to consent to, or to withdraw consent to the provision of any care, treatment, surgery, service or procedure to maintain, diagnose or treat a physical or mental condition, as well as the right to sign such medical forms as may be necessary to carry out such decisions, talk with health care personnel, examine my medical records and to consent to the disclosure of such records;

To file claims for medical insurance and to obtain information from any insurance company with respect to any policy of health or medical insurance under which I am insured; to have access to my medical records and to obtain information of any type from any physician or other health care professional who may be treating me;

I may have executed an Advance Directive for Healthcare prepared in accordance with Alabama law, but I recognize that an occasion may arise when my physician may wish to consult with someone else regarding the utilization, withholding or withdrawal of certain medical procedures. If my attending physician is uncertain about my wishes regarding any particular procedure, I authorize my Attorney in Fact to consult with my physician in this regard.

Notwithstanding the foregoing, any Advance Directive for Healthcare signed by me shall take precedence in the event of a disagreement between my wishes expressed in that document and any decision favored by my Attorney in Fact.

I grant to my Attorney in Fact full power and authority to do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that my said Attorney in Fact, or his substitute, shall lawfully do or cause to be done by virtue of this Power of Attorney and the rights and powers herein granted.

This instrument shall take effect immediately. This instrument is to be construed and interpreted as a Durable and General Power of Attorney. The enumeration of specific items, rights, acts of powers herein is not intended to, nor does it, limit or restrict and is not to be construed or interpreted as limiting or restricting, the general powers herein granted to my said Attorney in Fact.

In the event it becomes appropriate in the Judgment of the court to appoint a guardian, custodian, or other fiduciary for my benefit, I hereby direct that the Court shall appoint as such fiduciary my wife, **Shahin Motazedi**.

This instrument is to be construed and interpreted as a Durable and General Power of Attorney. The enumeration of specific items, rights, acts of powers herein is not intended to, nor does it, limit or restrict and is not to be construed or interpreted as limiting or restricting, the general powers herein granted to my said Attorney in Fact.

This Power of Attorney shall remain in effect throughout the disability, incompetency, or the incapacity of the principal and shall remain in effect until the occurrence of the first of the following circumstances:

- (1) My death;
- (2) The death of said Attorney in Fact; or
- (3) until the revocation of the Power of Attorney by me in writing.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this the 16<sup>th</sup> day of July, 2002.

  
\_\_\_\_\_  
Ali Motazedi

STATE OF ALABAMA)  
JEFFERSON COUNTY)

I, THE UNDERSIGNED AUTHORITY, a Notary Public in and for said County in said State, hereby certify that **Ali Motazedi**, whose name is signed to the foregoing Durable Power of Attorney and who is known to me, acknowledged before me on this day that, being informed of the content of said Durable Power of Attorney, he executed the same voluntarily on the day the same bears date.

Given under my hand and seal this the 16th day of July, 2002.

  
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Notary Public

My Commission expires: 11/16/2002



Filed and Recorded  
Official Public Records  
Judge James W. Fuhrmeister, Probate Judge,  
County Clerk  
Shelby County, AL  
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