SATISFACTION OF HOSPITAL LIEN

STATE OF ALABAMA COUNTY OF Shelby

INSTRUMENT# 2005081000410960

KNOW ALL MEN BY THESE PRESENTS, THAT THE UNDERSIGNED RENEE KORRECKT, ACKNOWLEDGES FULL PAYMENT OF THE INDEBTNESS SECURED BY THAT CERTAIN HOSPITAL LIEN AGAINST SHAWN HERNANDEZ, RECORDED IN THE OFFICES OF THE JUDGE OF PROBATE OF SHELBY COUNTY, ALABAMA, IN COLUMBIANA, ALABAMA, AND THE UNDERSIGNED DOES FURTHER HEREBY RELEASE AND SATISFY SAID LIEN.

ACCOUNT NUMBER: 55744130 date of service 2/16/05 AMOUNT \$851.00

IN WITNESS WHEREOF, THE UNDERSIGNED RENEE KORRECKT, HAS CAUSED THESE PRESENTS TO BE EXECUTED THIS 26TH DAY OF JULY 2018.

Vendor Management Analyst

STATE OF ALABAMA COUNTY OF JEFFERSON

CORPORATE ACKNOWLEDGEMENT

I, THE UNDERSIGNED, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND SAID STATE, HEREBY ACKNOWLEDGE THAT RENEE KORRECKT WHOSE NAME AS VENDOR MANAGEMENT ANALYST A DULY APPOINTED AGENT OF BAPTIST HEALTH SYSTEM, A CORPORATION, IS SIGNED TO THE FOREGOING INSTRUMENT, AND WHO IS KNOWN TO ME, ACKNOWLEDGED BEFORE ME ON THIS DAY THAT, BEING INFORMED OF THE CONTENTS OF THE INSTRUMENT, SHE, AS SUCH AGENT AND WITH FULL AUTHORITY, EXECUTED THE SAME VOLUNTARILY FOR AND AS THE ACT OF SAID CORPORATION.

GIVEN UNDER MY HAND AND SEAL THIS 26TH DAY OF JULY 2018.

Shelby Cnty Judge of Probate, AL

07/31/2018 02:58:35 PM FILED/CERT

EXPIRATION DATE

NOTARY ,PUBI