BOOK 11485 PG. 544

NO TITLE EXAMINATION HAS BEEN REQUESTED OF NOR PERFORMED BY THE UNDERSIGNED NOTARY PUBLIC, AND THE DESCRIPTION OF ANY IMMOVABLE PROPERTY IS AS FURNISHED BY THE PARTIES.

QUIT CLAIM DEED

THIS INDENTURE, made as of May 17, 1999, between CAROLYN W. ROBINETTE, having an address at 1301 Neelys Bend Road #C-19, Madison, Tennessee 37115, (collectively referred to as "Transferor"), and THE CAROLYN W. ROBINETTE AND/OR EULA W. SUDDARTH REVOCABLE LIVING TRUST, having an address at 204 Elmwood Drive Lebanon, Tennessee 37087 and 1301 Neelys Bend Road #C-19, Madison, Tennessee 37115, ("Transferees").

WITNESSETH, that Transferors, in consideration of Ten Dollars and other valuable consideration, the receipt and sufficiency of which is hereby acknowledged, so hereby transfer unto Transferee and its heirs, executors, administrators, successors and assigns forever.

ALL that certain plot, piece or parcel of land, with the buildings and improvements thereon erected, situate, lying and being in the County of Davidson, and the State of Tennessee, being more particularly described as follows, to-wit:

SEE "EXHIBIT A" ATTACHED

34.50

TOGETHER with all right, title and interest, if any, of Transferors in and to any streets and roads abutting said premises to the center lines thereof,

This deed is given without covenant, representation or warranty by Transferors, whether express or implied, and without recourse against Transferors in any possible event.

QUIT CLAIM DEED

PICK-UP

99 MAY 19 PM 3:21
BILL GARNETT REGISTER
DAVIDSON COUNTY, TN.

0588852

IN WITNESS WHEREOF, Transferors have duly executed this deed on the date first above written.

WITNESSES:

Carolyn W. Robinette
CAROLYN W. ROBINETTE

Prepared by: Southern Planning & Estate Services
Legal Department
2325 Severn, Suite #10
Metairie, LA. 70001
(877) 731-3994

STATE OF TENNESSEE

COUNTY OF DAVIDSON

Before me, a notary public, on this day personally appeared CAROLYN W. ROBINETTE, who acknowledged that she did sign the foregoing instrument, and acknowledged to me that she executed the same for the uses and purposes and consideration therein expressed.

GIVEN UNDER MY HAND and official seal this 17 day of May, 1999.

Notary Public

C. KOVIACICH NOTARY PUBLIC AT LARGE

After recording return to and send tax bills to:
GRANTOR/GRANTEE:
Carolyn W. Robinette
1301 Neelys Bend Road #C-19
Madison, Tennessee 37115
615-865-4081

Prepared by: Southern Planning & Estate Services
Legal Department
2325 Severn Ave., Suite 10
Metairie, Louisiana 70001
(877) 731-3994

QUIT CLAIM DEED

STATE OF TENNESSEE

BOOK 11485 PG. 546

COUNTY OF DAVIDSON

OATH OF VALUE (CONVEYANCES)

We, hereby swear or affirm that to the best of my affiance, knowledge, information or belief that the actual consideration for this transfer is $___10.00__(REVOCABLE LIVING TRUST) which amount is equal to or greater than that which the property would command at a fair and voluntary sale.

Carolyn W. Robinette
CAROLYN W. ROBINETTE

Before me, a notary public, on this day personally appeared CAROLYN W. ROBINETTE who acknowledged that she did sign the foregoing instrument, and acknowledged to me that she executed the same for the uses and purposes and consideration therein expressed.

GIVEN UNDER MY HAND and official seal this 17 day of May, 1999.

Notary Public
My Commission expires: [illegible]

NOTARY PUBLIC AT LARGE DAVIDSON CO. TENN.

Send tax bills to:

Mrs.Carolyn W. Robinette
1301 Neelys Bend Road #C-19
Madison, Tennessee 37115
615-865-4081

QUIT CLAIM DEED

"EXHIBIT A"

Prepared by: Southern Planning & Estate Services
Legal Department
2325 Severn Ave., Suite 10
Metairie, Louisiana 70001
(877) 731-3994

STATE OF TENNESSEE

COUNTY OF DAVIDSON

Map#11 D
Parcel #92368

Apartment Unit No. C-19 of Neely's Bend Condominium created under Title 64, Section 2701 et seq., as amended, Tennessee Code Annodated and as established by a Master Deed of record in Book 5483, Page 86, Register's Office for Davidson County, Tennessee, together with the undivided percentage interest in the Common Elements, appurtenant to said Unit as set forth in Exchibit A-1 of said Master Deed, Reference is hereby made to the plat of Neely's Bend Condominium of Record in Book 5200 Page 200, said Register's Office for a more complete and accurate description of such Unit.

Being the same property conveyed by deed to Carolyn W. Robinette by Faye Ruth Hardy, dated May 30, 1985, filed for record in Book 6573 Page 845.

QUIT CLAIM DEED

Exhibit A.

THIS INSTRUMENT PREPARED BY:
Rochelle, McCulloch & Aulds
109 Castle Heights Avenue North
Lebanon, TN 37087

DURABLE GENERAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, **EULA SUDDARTH** of Wilson County, Tennessee, do hereby appoint and constitute my daughter, **CAROLYN ROBINETTE,** or in the event of her death, incompetency or inability to serve, my grandson, **RUDOLPH LEE ROBINETTE,** my true and lawful attorney-in-fact for me and in my name, place and stead and on my behalf:

1. Generally to do, sign, or perform in my name, place and stead any act, deed, matter or thing whatsoever that ought to be done, signed or performed, or that, in the opinion of my attorney-in-fact ought to be done, signed or performed in and about the premises, of every nature and kind whatsoever, to all intents and purposes whatsoever, as fully and effectually as the principal could do if personally present and acting. The enumeration of specific powers hereunder shall not in any way limit the general powers conferred herein;

2. To receive from or disburse to any source whatever monies through checking or savings or other accounts or otherwise, to endorse, sign and issue checks, withdrawal receipts, or any other instrument, and to open or close any accounts in my name alone or jointly with any other person;

3. To buy, sell, lease, alter, maintain, pledge or in any way deal with real and personal property, including but not limited to any stocks, bonds, mutual funds, and marketable securities, or any other security, whether publicly held and marketed on any public exchange or on any over-the-counter exchange, or whether closely held and not marketed on any public exchange, and to sign each instrument necessary or advisable to complete any real or personal property transaction, including, but not limited to, deeds, deeds of trust, closing statements, options, notes and bills of sale;

4. To make, sign and file each income, gift, property or any other tax return or declaration required by the United States or any state, county, municipality or other legally constituted authority;

5. To acquire, maintain, cancel or in any manner deal with any policy of life, accident, disability, hospitalization, medical or casualty insurance, and to prosecute each claim for benefits due under any policy;

6. To provide for my support and protection, including, without limitation, provision for food, lodging, housing, medical services, recreation and travel;

7. To have free and private access to any safe deposit box in my individual name, alone or with others, in any bank, including authority to have it drilled, with full right to deposit and withdraw therefrom or to give full discharge therefor;

8. To receive and give receipt for any money or other obligation due or to become due to me from the United States of America, or any agency or subdivision thereof, and to act as representative payee for any payment to which I may be entitled, and to effect redemption of any bond or other security wherein the United States of America, or any agency or subdivision thereof, is the obligor or payor, and to give full discharge therefor;

9. To contract for or employ agents, accountants, advisors, attorneys and others for services in connection with the performance by my attorney-in-fact of any powers herein;

10. To buy United States Government bonds redeemable at par in payment of any United States estate taxes imposed at my death;

11. To borrow money for any of the purposes described herein, and to secure such borrowings in such manner as my attorney-in-fact shall deem appropriate, and to use any credit card held in my name for any of the purposes described herein;

12. To establish, utilize and terminate checking and savings accounts, money market accounts and agency accounts with financial institutions of all kinds, including securities brokers and corporate fiduciaries;

13. To invest or reinvest each item of money or other property and to lend money or property upon such terms and conditions and with such security as my attorney-in-fact may deem appropriate, or to renew, extend, or modify loans, all in accordance with the fiduciary standards of Section 35-3-117;

14. To engage in and transact any and all lawful business of whatever nature or kind for me and in my name, whether as partner, joint adventurer, stockholder or in any other manner or form, and to vote any stock or enter voting trusts;

15. To pay dues to any club or organization to which I belong, and to make charitable contributions in fulfillment of any charitable pledge made by me;

16. To transfer any property owned by me to any revocable trust created by me with provisions for my care and support;

17. To sue, defend or compromise suits and legal actions, and to employ counsel in connection with the same, including the power to seek a declaratory judgment interpreting this power of attorney, or a mandatory injunction requiring compliance with the instructions of my attorney-in-fact, or actual and punitive damages against any person failing or refusing to follow the instructions of my attorney-in-fact.

18. To reimburse my attorney-in-fact or others for all reasonable costs and expenses actually incurred and paid by such person on my behalf.

19. To create, contribute to, borrow from and otherwise deal with an employee benefit plan or individual retirement account for my benefit; to select any payment option under any employee benefit plan or individual retirement account in which I am a participant or to change options I have selected; to make "roll-overs" of plan benefits into other retirement plans; and to apply for and receipt payments and benefits;

20. To execute other power of attorney forms on my behalf which may be required by the Internal Revenue Service, financial or brokerage institutions, or others, naming the attorney-in-fact hereunder as attorney-in-fact for me on such additional forms;

21. To request, receive and review any information, verbal or written, regarding my personal affairs or my physical or mental health, including legal, medical and hospital records; to execute any releases or other documents that may be required in order to obtain such information; and to disclose such information to such persons, organizations, firms or corporations as my attorney-in-fact shall deem appropriate;

22. To make advance arrangements for my funeral and burial, including the purchase of a burial plot and marker, if I have not already done so;

23. To receive, accept and acknowledge on my behalf any and all funds and other property of every nature to which I may be entitled as a beneficiary, legatee or heir-at-law with respect to the estate of any decedent;

24. To transact, conduct and operate any business on my behalf, to vote any shares of stock owned by me in any corporation or in any mutual fund, to execute proxies and waivers, to receive and receipt for any benefits accruing to me from the ownership of any investment or business interest, and generally do anything and everything necessary and proper for the furtherance, promotion and protection of any interest in any business or any investment owned by me;

25. To apply for licenses, keep records and accounts, make reports, give statements, receive and give out information pertaining to me or to any business interest I may own.

26. To make gifts for estate planning or other purposes, provided, however, that such gifts need not be made in equal amounts to all my relatives in the same degree of kinship to me and no donee of such gifts shall receive more than the annual exclusion amount under Internal Revenue Code Section 2503(b), or twice the annual exclusion amount to allow for split-gift treatment under Internal Revenue Code Section 2513, in any one calendar year.

27. Pursuant to T.C.A. 34-6-104(b), I hereby nominate **CAROLYN ROBINETTE**, or in the event of her death, incompetency or inability to serve, **RUDOLPH LEE ROBINETTE**, to be my Conservator, Guardian of my estate and of my person if any protective proceeding for my person and/or my estate is hereafter commenced.

Giving and granting unto the said **CAROLYN ROBINETTE**, or in the event of her death, incompetency or inability to serve, **RUDOLPH LEE ROBINETTE**, my said attorney-in-fact, full power and authority to do, execute and perform all and every other act and thing whatsoever, without any limitation whatever and without being confined to the specific acts hereinabove set out; requisite or necessary to be done in and about the premises as fully and to all intents and purposes as I might or could do and I hereby ratify and confirm all that **CAROLYN ROBINETTE**, or in the event of her death, incompetency or inability to serve, **RUDOLPH LEE ROBINETTE**, my said attorney-in-fact, shall lawfully do or cause to be done by virtue of these presents, and for me and in my name and on my behalf.

Pursuant to the authority contained in the Uniform Durable Power of Attorney Act found at T.C.A. 34-6-101, et seq., it is hereby specifically provided that this Power of Attorney shall not be affected by the subsequent disability or incapacity of the principal.

For purposes of this Power of Attorney, the disability or incapacity of the first-named attorney-in-fact shall be deemed to exist when her incapacity has been declared by a court of competent jurisdiction, or when a conservator has been appointed, or upon presentation of a certificate executed by two (2) physicians licensed to practice in the state of Tennessee or the state in which the attorney-in-fact may be residing or may be hospitalized which states that in the physicians' opinion the first-named attorney-in-fact is (a) incapable of caring for herself or (b) physically or mentally incapable of managing her financial affairs. The effective date of such incapacity shall be the date of the decree adjudicating incapacity, the date of the decree appointing a conservator, or the date of the physicians' certificate, as the case may be. A certified copy of the decree declaring the first-named attorney-in-fact's incapacity or appointing a conservator, or the physicians' certificate, shall be attached to the original of this document and recorded in the same county or counties as the original, if the original is recorded. The first-named attorney-in-fact shall be deemed to have regained capacity if there is a finding to that effect by a court of competent jurisdiction, or if

any conservatorship has been judicially terminated, or upon presentation of a certificate executed by two (2) physicians licensed to practice in the state of Tennessee or the state in which the attorney-in-fact shall be residing which states the physicians' opinion that the first-named attorney-in-fact is (a) capable of caring for herself or (b) physically or mentally capable of managing her financial affairs. A certified copy of the decree declaring the attorney-in-fact's capacity or terminating the conservatorship, or the physicians' certificate, shall be attached to the original of this document and recorded in the same county as the original, if the original is recorded.

These powers shall be effective until a written revocation is recorded in the Register's Office for Wilson County, Tennessee.

IN WITNESS WHEREOF, I have hereunto set my hand this 20th day of ~~February~~ November, 1998.

EULA SUDDARTH

STATE OF TENNESSEE

COUNTY OF WILSON

Personally appeared before me, a Notary Public, in and for said state and county, the within named, EULA SUDDARTH, with whom I am personally acquainted and who acknowledged that she executed the foregoing instrument for the purposes contained therein.

WITNESS MY HAND AND SEAL this 20th day of ~~February~~ November, 1998.

NOTARY PUBLIC

My commission expires: 1-17-2000

SIGNATURE GUARANTEED
MEDALLION GUARANTEED
FIRST TENNESSEE BANK NATIONAL ASSOCIATION
AUTHORIZED SIGNATURE
AC100299
SECURITIES TRANSFER AGENTS MEDALLION PROGRAM