THIS INSTRUMENT PREPARED BY
Brian Shelton, Esq.
Bradley Arant Boult Cummings LLP
1600 Division Street, Suite 700
Nashville, TN 37203

AFFIDAVIT

STATE OF TENNESSEE)

COUNTY OF DAVIDSON)

On this 1ST day of MAY, 2014, before me personally appeared Leslie Raymond (Ray) Baumgartner, II, Jannie Kay Seymour and Judith Ann Serna, (collectively the "Affiants"), who, having been duly sworn, state upon their personal knowledge:

1. That they are at least eighteen (18) years of age; and

2. That Affiants are the only children born to their mother, Jannie E. Baumgartner (a/k/a Jannie T. Baumgartner) and their father, Leslie R. Baumgartner; and

3. That Leslie R. Baumgartner died on July 1, 2008; and

4. That Jannie E. Baumgartner executed a Durable General Power of Attorney dated February 27, 2006 (the "Power of Attorney"), naming her son, Leslie Raymond (Ray) Baumgartner, II, as her true and lawful attorney-in-fact, a true and correct copy of which is attached hereto as EXHIBIT A; and

5. That the Power of Attorney is valid, there has been no revocation of same, and that it is still in full force and affect; and

6. That Jannie E. Baumgartner is still living, but is unable to execute documents on her own behalf.

This Affidavit is freely given by the Affiants to acknowledge the validity of the Power of Attorney of Jannie E. Baumgartner and to have same placed of record with the Register of Davidson County, Tennessee.

BILL GARRETT, Davidson County
Trans:T20140029992 AFFIDAVIT
Recvd: 05/01/14 14:51 7 pgs
Fees:37.00 Taxes:0.00
20140501-0036952

Further, Affiants saith not.

Leslie Raymond Baumgartner, II

Jannie Kay Seymour

Judith Ann Serna

AFFIANTS

STATE OF TENNESSEE)

COUNTY OF DAVIDSON)

Before me, the undersigned, a Notary Public in and for the County and State aforesaid, personally appeared **Leslie Raymond Baumgartner, II**, the within bargainor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged that he executed the foregoing instrument for the purposes therein contained.

WITNESS my hand and seal at office in Nashville, Tennessee, this the 15 day of May, 2014.

Notary Public

My Commission Expires:
6-21-14

CAROL A. WILSON
STATE OF TENNESSEE
NOTARY PUBLIC
DAVIDSON COUNTY, TENN.

My Commission Expires JUNE 21, 2016

STATE OF TENNESSEE)

COUNTY OF Davidson)

Before me, the undersigned, a Notary Public in and for the County and State aforesaid, personally appeared **Jannie Kay Seymour**, the within bargainor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged that she executed the foregoing instrument for the purposes therein contained.

WITNESS my hand and seal at office in Nashville, Davidson Cty, Tennessee, this the 25 day of April, 2014.

KAY BROOKS STATE OF TENNESSEE NOTARY PUBLIC DAVIDSON COUNTY My Commission Expires 01-11-2017

Notary Public

My Commission Expires:
1-11-17

STATE OF TENNESSEE)

COUNTY OF Davidson

Before me, the undersigned, a Notary Public in and for the County and State aforesaid, personally appeared **Judith Ann Serna**, the within bargainor, with whom I am personally acquainted (or proved to me on the basis of satisfactory evidence), and who, upon oath, acknowledged that she executed the foregoing instrument for the purposes therein contained.

WITNESS my hand and seal at office in Nashville, Tennessee, this the 25th day of April, 2014.

Debra L. Hall

Notary Public

DEBRA L. HALL STATE OF TENNESSEE NOTARY PUBLIC RUTHERFORD COUNTY

My Commission Expires:
08/22/16

EXHIBIT A

Power of Attorney of Jannie T. Baumgartner dated February 27, 2006 Attached

This Instrument Prepared By: Randle S. Davis, Esq., 150 Fourth Ave., North, Suite 1850, Nashville, Tennessee 37219-2408

DURABLE GENERAL POWER OF ATTORNEY

1. **Power of Attorney**. I, **Jannie T. Baumgartner**, do hereby make, constitute, and appoint **Leslie Raymond (Ray) Baumgartner, II**, as my true and lawful attorney-in-fact, for me and in my name, place, and stead and on behalf of me for my use and benefit. I authorize and empower my said attorney-in-fact to do each of the following:

(a) **General Powers**. 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 I could do if personally present and acting. In addition, I incorporate herein by reference all of the powers contained in T.C.A. Section 34-6-109, as fully as if set out verbatim herein. The enumeration of specific powers herein shall not in any way limit the general powers conferred herein unless otherwise indicated.

(b) **Finances**. 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; to open or close any accounts in my name alone or jointly with any other person; and to establish, utilize and/or terminate checking and savings accounts, money market accounts and agency accounts with financial institutions of all kinds, including securities brokers and corporate fiduciaries.

(c) **Real and Personal Property**. To buy, sell, lease, alter, maintain, pledge, or in any way deal with real and personal property, and 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, notes, and bills of sale. Not intending to limit the scope of this provision, but as an example only: This provision is intended to empower and authorize my attorney-in-fact to borrow against, mortgage or sell (via public or private sale) in my said attorney-in-fact's sole discretion any real property owned by me including, but not limited to, any residential property owned by me.

(d) **Tax Returns**. To make, sign, and file each income or gift tax return or declaration required by the United States or any state, county, municipal or other legally constituted authority for any period of time prior to the revocation of this power.

(e) **Insurance**. 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. However, no such power shall be construed or used to give any incident of ownership to my attorney-in-fact in any life insurance policy on the life of my attorney-in-fact.

(f) **Support**. To provide for the support and protection of me and of my family,

including, without limitation, provision for food, housing, medical services, recreation, and travel.

(g) **Safe Deposit Box.** To have free and private access to any safe deposit box in my name or rented by me in any bank, including authority to have it drilled, with full right to deposit and withdraw therefrom or to give full discharge therefor.

(h) **Gifts, Grants, Etc.** I specifically authorize and empower my said attorney-in-fact to make in my name and in my stead gifts, grants or other transfers without consideration.

(i) **Agents.** To contract for or employ agents, accounts, advisors, attorneys, and others for services in connection with the performance by said attorney-in-fact of any powers herein, and to appoint a substitute or substitutes to perform any of the acts that my attorney-in-fact is by this instrument authorized to perform, with the right to revoke such appointment of a substitute shall not terminate with the death or disability of my attorney-in-fact.

2. **Ratification.** I hereby ratify and confirm each act done or caused to be done by my attorney-in-fact in and about the premises by virtue of this power of attorney.

3. **Inducement.** For the purpose of inducing any party to act in accordance with the powers granted in this power of attorney, I hereby warrant that if this power of attorney is terminated for any reason whatsoever, I and my successors will save such party harmless from any loss suffered or liability incurred by such party in acting in accordance with this power of attorney prior to the time on which any person has actual notice of such revocation/termination. Any party may rely upon a photocopy of this Power without production of the original.

4. **Durability.** This power of attorney shall not be affected by any disability, incompetence, or incapacity which I may suffer at any future time or times, whether or not the same shall be adjudicated by any court, it being my intent that the authorizations and powers granted herein shall remain exercisable notwithstanding any such subsequent occurrence, and that this power of attorney shall be construed to satisfy the Tennessee Uniform Durable Power of Attorney Act, T.C.A. Section 34-6-101, et seq.

5. **Exculpation.** Under no circumstances shall my attorney-in- fact incur any liability to me for acting or refraining from acting hereunder, except for acts of willful misconduct or gross negligence.

6. **Revocation.** This power of attorney shall remain in full force and effect until it is revoked by written notice delivered to my attorney-in-fact. If this instrument has been recorded in the public records, then the instrument of revocation shall be recorded in the same public records.

7. **No Conservator.** By executing this instrument upon the advice of legal counsel, I have carefully and deliberately created the means and manner by which I desire that my person and property be cared for, managed and protected in the event I shall become unable to execute such responsibilities myself. Accordingly, it is my intention and my desire that I herewith

express in the strongest possible terms, that no guardian or conservator be appointed for me so long as there is an attorney-in-fact named in this instrument who is willing and able to act and serve under this instrument. I request that any court of competent jurisdiction that receives and is asked to act upon a petition for the appointment of a guardian or conservator for me give the greatest possible weight to my intention and desires as expressed herein.

8. **HIPAA Authority**. I intend by this power of attorney to designate the individual or individuals who shall have authority to act on my behalf in making decisions related to my health care. In exercising such authority, my agent shall constitute my "personal representative" (as defined in 45 CFR §164.502(g)(1)) and be treated as I would for all purposes of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), 42 USC §1320d and 45 CFR §§160 and 164, and as such shall (1) have access to all my "individually identifiable health information," including any "protected health information" (as those terms are defined in the regulations under HIPAA at 45 CFR §160.103), verbal or written; (2) possess, without limitation, my right of access to inspect and obtain a copy of protected health information about me as required by HIPAA at 45 CFR §164.524; and (3) possess, without limitation, my right to an accounting of disclosures of protected health information as required by HIPAA at 45 CFR §164.528. My agent's exercise of the powers under this Paragraph shall not be deemed events: (1) in which treating my agent as personal representative could endanger me for purposes of 45 CFR §164.502(g)(5)(ii), or (2) in which it is not in my best interest for my agent to be treated as my personal representative for purposes of 45 CFR §164.502(g)(5)(ii). This authority applies to any information governed by HIPAA and may not be revoked except by revocation of this document as provided herein, which revocation may not be made by an extrinsic document unless such document specifically refers to this power of attorney.

In Witness Whereof, I have signed this power of attorney this 27 day of ~~January~~ February, 2006.

Jannie T. Baumgartner

Jannie T. Baumgartner

STATE OF TENNESSEE)
COUNTY OF Williamson)

Subscribed, sworn to and acknowledged before me by **Jannie T. Baumgartner**, the principal, this 27 day of February, 2006.

BONNIE B. SNEED NOTARY PUBLIC AT LARGE DAVIDSON COUNTY, TENN.

Bonnie B Sneed

Notary Public

5-28-06

My Commission Expires