
Power of Attorney

by Documatica Legal Forms Inc.

I, Nigel McClure, currently residing at 3230 Carroll Court, Newark, in the Country of Northern Ireland, hereby execute THIS POWER OF ATTORNEY, on this 27th day of July, 1998.

1. Previous Power of Attorney

I HEREBY REVOKE any previous power of attorney granted and executed by me.

2. Attorneys-in-fact

I HEREBY APPOINT Margarite Howard of 9896 Beldaire Square, Little Rock, U.S. Virgin Islands, to act as my Attorney-in-fact.

3. Successor Attorney-in-fact

On the death, refusal or inability of Margarite Howard to act or continue to act, I APPOINT Al Corcoran of 747 Willis Circle, Peoria, Puerto Rico to act as my successor Attorney-in-fact.

4. Second Successor Attorney-in-fact

On the death, refusal or inability of Al Corcoran to act or continue to act, I APPOINT Joaquina Hyatt of 1593 Firwood Loop, West Valley City, Northern Ireland to act as my successor Attorney-in-fact.

5. My Attorney-in-fact

Throughout this instrument, references to 'my Attorney-in-fact' shall be taken to refer to my Attorney-in-fact and my successor Attorneys-in-fact.

6. Governing Laws

The laws of the Commonwealth of Kentucky shall govern this instrument. Further, I direct my Attorney-in-fact to act in accordance with the laws of the Commonwealth of Kentucky at any time when he or she is acting on my behalf.

7. Delegation of Authority

I do NOT authorize my Attorney-in-fact to delegate or subdelegate any authority granted in this document.

8. Liability

Notwithstanding gross negligence or willful misconduct, I hereby release my Attorney-in-fact from any liabilities incurred for any action taken or not taken in accordance with the authorities granted herein. This release of liability extends to me, my heirs, my successors, and my estate.

9. Effective Date

This instrument will take effect immediately upon execution, and will immediately terminate in its entirety upon my mental incapacity or death.

10. Powers of Attorney-in-fact

My Attorney-in-fact will have the following power(s):
(Initial)

_____ 1. Real Estate Transactions

My Attorney-in-fact shall have the authority to manage any interests I may have with respect to real property, and, in general, exercise all powers with respect to real estate which I otherwise could if personally present and under no disability. These powers include, but are not limited to:

1. The authority to purchase, sell, and exchange real estate (including, but not limited to, the authority to convey, assign and accept title to real estate).
2. The authority to rent and lease real estate (including, but not limited to, the ability to collect all rents due, sue for unreceived rents, and eject and remove tenants and other persons).
3. The authority to encumber real estate (including, but not limited to, the authority to grant easements, place real estate as security on loans, create conditions and release rights of homestead with respect to real estate, convey with or without covenants, create land trusts, and exercise all powers under land trusts).

4. The authority to maintain property (including, but not limited to, the authority to manage, operate, repair, improve, subdivide, and insure real estate; pay, protest, contest, and compromise real estate assessments and taxes).

_____ **2. Maintain Assets and Make Investments**

My Attorney-in-fact shall have the authority to retain the assets I own as of the date this Power of Attorney becomes effective, and reinvest them in similar investments. My Attorney-in-fact shall also have the power to invest my assets in any new investments of his or her choosing (including those investments that may not be authorized by any applicable legislation), providing that such investments would be made by a prudent and reasonable investor.

_____ **3. Banking Transactions**

My Attorney-in-fact shall have the authority to do any act through a bank or financial institution which I could otherwise do if personally present and under no disability. These powers include, but are not limited to:

1. The authority to open, maintain, control and close my accounts with any type of financial institution (including, but not limited to, banks, credit unions, brokerage firms, trust companies, and building and loan associations).
2. The authority to deposit in, withdraw from, write checks on, negotiate or endorse checks or other instruments, obtain any and all records directly related to or incidentally arising out of the above transactions, create and deliver financial statements or other records, and exercise all other powers with respect to my accounts at any bank or financial institution.
3. The authority to borrow money from, pledge any tangible or intangible personal property as security to, or sign, extend, renew, pay and satisfy any notes or other forms of obligation to any bank or financial institution, if deemed necessary in the reasonable judgement of my Attorney-in-fact.
4. The authority to open, access, drill, or surrender any safe deposit boxes I own, and to manage my safe deposit box contracts (including, but not limited to, the authority to sign, renew, release, or terminate any such contracts), and exercise any other power with respect to my safe deposit boxes which I otherwise could if personally present and under no disability.

4. Insurance Transactions

My Attorney-in-fact shall have the authority to exercise all powers with respect to insurance policies (which terms include, without limitation, life, health, disability, accident, automobile casualty, property or liability insurance policies) and annuity contracts which I otherwise could if personally present and under no disability. These powers include, but are not limited to:

1. The authority to acquire, continue, modify, renew, terminate any insurance policies.
2. The authority to pay premiums or assessments on or surrender and collect all distributions from any insurance policies.
3. The authority to manage all cash payouts from any insurance policies.
4. The authority to use insurance policies as collateral when borrowing from insurers and third parties.
5. The authority to change the beneficiaries on any life insurance policies. Unless my Attorney-in-fact was already named as a beneficiary of any policy before the execution of this instrument, my Attorney-in-fact cannot name himself or herself as a beneficiary of any life insurance policies.

5. Business Operating Transactions

My Attorney-in-fact shall have the authority to take any actions which he or she deems necessary to conduct, maintain or administrate any business (including, but not limited to, proprietorships, joint ventures, partnerships, corporations, trusts, or other legal entities) which I own or have an interest in, and, in general, exercise all other powers with respect to my business interests and operations which I otherwise could if personally present and under no disability. This power includes, but is not limited to:

1. The authority to direct, supervise, manage or otherwise participate in the operation of any business.
2. The authority to buy, sell, incorporate, operate, reorganize, expand, merge, terminate, dissolve, or liquidate any business.

3. The authority to execute, seal and deliver any instrument.
4. The authority to exercise voting rights with respect to any stock I may own, either in person or by proxy.
5. The authority to execute partnership agreements and amendments.
6. The authority to elect or employ officers, directors and agents for any business.
7. The authority to compensate and discharge business managers, employees, attorneys, agents, consultants, and accountants.

_____ **6. Claims and Litigation**

My Attorney-in-fact shall have the authority to initiate, maintain, arbitrate, defend, settle or otherwise manage and dispose of (including the right to receive or pay any resulting settlement), any and all actions, suits or other legal proceedings against me or on my behalf and, in general, exercise all other powers with respect to claims and litigation which I otherwise could if personally present and under no disability.

_____ **7. Estate Transactions**

My Attorney-in-fact shall have the authority to do any act that I could otherwise do if personally present and under no disability with regard to matters affecting any and all trusts, probate estates, or other funds which I may receive as payment as a beneficiary. Such powers include, but are not limited to:

1. The authority to exercise, assign, accept, release, renounce, demand, sue for, claim and recover, any legacy, gift, bequest, devise or other property interest or payment due to me or my estate.
2. The authority to exercise any power over and assert any interest in any trust, estate, or property subject to fiduciary control.
3. The authority to establish a revocable trust that will benefit me during my lifetime, and be distributed to the legal representative of my estate following my death.
4. The authority to disclaim any interest or assets which might otherwise be transferred or distributed to me, with the

exception of assets I am entitled to that will pass directly or indirectly to my Attorney-in-fact's estate if disclaimed.

My Attorney-in-fact shall NOT have the authority to make or change a will, revoke or amend an established and constituted trust, or require trustees of any trust to which the Principal is a beneficiary to pay income or principal to him or her unless that authority is specifically given in the statutory proper power form.

_____ **8. Family Care**

My Attorney-in-fact shall have the authority to make any and all expenditures necessary for the support of those I am legally required to support and any other persons that I have chosen to support, and, in general, exercise all other powers with respect to caring for those I am supporting which I otherwise could if personally present and under no disability. Such expenditures include living costs (including, but not limited to, clothing, food, accommodation, and travel expenses), education, medical care, and other expenditures for the general benefit and advancement of those I am supporting.

_____ **9. Employ Required Professionals**

My Attorney-in-fact shall have the authority to employ any companions, nurses, physicians, agents, consultants, or any other persons for the care of myself and my family (including, but not limited to, my spouse, dependent children and others whom I have decided to care for). I also authorize my Attorney-in-fact to employ any servants, accountants, attorneys, clerks, workmen, and any other persons for the management, administration, protection, and maintenance of my property and estate. The above mentioned employees may be employed for such a duration, and compensated at such a rate, as my My Attorney-in-fact deems appropriate.

_____ **10. Gifts**

My Attorney-in-fact shall have the authority to provide gifts, cash or otherwise, to any persons with whom I have established a clear pattern of past giving, on such occasions as birthdays, seasonal holidays, or other days of celebration or special occasions. My Attorney-in-fact shall also have the power to make gifts to such persons for the purposes of estate planning. My Attorney-in-fact will make the aforementioned gifts in amounts he or she deems prudent, considering all of the circumstances (including, but not limited to, the size and nature of my past gifts, the current financial position of my estate, and my current income requirements).

_____ **11. Charitable Donations**

My Attorney-in-fact shall have the authority to make donations, cash or otherwise, to any charitable, political, or religious organizations with whom I have established a clear pattern of past giving. My Attorney-in-fact will make the aforementioned donations in amounts he or she deems prudent, considering all of the circumstances (including, but not limited to, the size and nature of my past donations, the current financial position of my estate, and my current income requirements).

_____ **12. Additional Power #1**

Lorem ipsum posuere neque, pellentesque pharetra.

_____ **13. Additional Power #2**

Lorem ipsum consectetur ultrices, nisi ligula blandit, justo luctus.

11. Attorney-in-fact Compensation

I shall compensate my Attorney-in-fact as follows:

1. I will reimburse my Attorney-in-fact for all out-of-pocket expenses incurred as a result of carrying out the directives herein; and
2. Lorem ipsum laoreet potenti placerat lectus aenean, ullamcorper sem interdum dolor lectus.

12. Personal Gain from Managing My Affairs

Notwithstanding transactions conducted in bad faith or transactions that are not in my best interest, my Attorney-in-fact is permitted to personally gain from transactions he or she completes to fulfil my directives herein.

13. Co-owning of Assets and Mixing of Funds

Execution of this instrument shall not alter my Attorney-in-fact's co-ownership of any of my assets or mixing of any of his or her funds with my funds.

14. Attorney-in-fact Restrictions

This Power of Attorney is subject to the following conditions or restrictions:

1. My Attorney-in-fact can only invest my money ONLY in government-issued savings bonds.

2. Lorem ipsum sodales habitant tristique, consequat justo tristique vehicula, interdum hendrerit fusce.
3. Lorem ipsum gravida aenean quisque ultricies, aenean lorem tempus nunc.
4. Lorem ipsum ut at dictumst, nostra lacus porttitor, tincidunt quisque placerat.
5. Lorem ipsum inceptos quis, cras mattis vel ut, fermentum feugiat.
6. Lorem ipsum nunc nec dui ultricies fusce, facilisis habitasse aptent lacinia massa.

15. Notice to Third Parties

Third parties obtaining this instrument may rely on it and act under it, and will not incur any liability to me or my heirs, assigns, or estate as a result of permitting my Attorney-in-fact to exercise any of his or her powers described herein, up until the revocation of this document, so long as the representations of my Attorney-in-fact are reasonable. Revocation will be considered to have occurred when the third party is made aware and fully recognizes that this document is no longer in effect.

16. Severability

Should applicable laws deem any part or portion of this instrument as invalid or unenforceable, the remaining provisions shall not be affected, and shall be enforced to as great an extent as possible.

(This space intentionally left blank)

17. Acknowledgment

As the Principal named in this Power of Attorney, I, Nigel McClure, hereby acknowledge:

1. I have read and understand the nature and effect of this Power of Attorney.
2. I am of the legal age in Kentucky to grant a Power of Attorney.
3. I am giving this Power of Attorney of my own free will and in the absence of coercion.

IN WITNESS WHEREOF I hereunto set my hand and seal at the City of Chattanooga, in the Province of Prince Edward Island, this 27th of July, 1998.

Nigel McClure

SIGNED, SEALED, AND DELIVERED
in the presence of:

WITNESS:

WITNESS CERTIFICATE

I, _____, currently residing at
_____, in the City of _____, in
the Country of _____ hereby acknowledge that:

1. I witnessed the execution of the Power of Attorney of Nigel McClure dated this 27th of July, 1998.
2. I am an adult of sound mind, with the capacity to witness the execution of this Power of Attorney.
3. In my opinion, Nigel McClure understands the nature and effect of this Power of Attorney and signed it of his or her own free will.
4. I am not the Attorney-in-fact named in the Power of Attorney nor am I his or her spouse or other family member.

(Signature of witness)

Instructions for Executing your Power of Attorney

Before executing this Power of Attorney, be sure that you have read it thoroughly and understand the powers you are granting.

To validate your Power of Attorney, you must sign it (with your usual signature) wherever your signature is required, and initial all the pages, in the presence of your notary public and/or witnesses. After you initial each page, your witness or notary should place their initials beside yours, and also provide their signature(s) wherever required.

To ensure the validity of this document, you must also PLACE YOUR INITIALS beside each of the powers which you have given to your chosen representative(s). Failure to do so may have an effect on the validity and enforceability of this document.

In most jurisdictions, a Durable Power of Attorney or a Power of Attorney which grants power over land or real estate must be signed in front of a Notary Public. In other jurisdictions, two witnesses must be present when the document is signed. To ensure the validity of your document, we highly recommend that you sign it in front of a Notary Public. We also recommend that it is signed in front of two witnesses.

Ensure that any witnesses who will sign your Power of Attorney are of legal age in your jurisdictions, and are of sound mind and mental capacity. When choosing your witness(es), remember that your spouse, partner, or child cannot be a witness. Similarly, witness(es) cannot be named as your representative(s) or alternate/successor representative(s) in this Power of Attorney, or be the spouse of your representative(s) or alternate/successor representative(s). Furthermore, some jurisdictions do not allow beneficiaries or executors of your will to act as witnesses. As a general rule, the best witnesses are those that do not have any financial relationship with you.

If this Power of Attorney will be used to give your representative(s) power over your real property or real estate, your representative(s) should have this document recorded in the land registry office of the jurisdiction in which the property is located. Not doing so may invalidate your document.

Notes:

(This space intentionally left blank)