

AND I HEREBY DECLARE that any act or thing lawfully done hereunder by my said attorney shall be binding on myself and my heirs, legal and personal representatives, and assigns;

PROVIDED, however, that all business transacted hereunder for me or for my account shall be transacted in my name, and that all endorsements and instruments executed by my said attorney for the purpose of carrying out the foregoing powers shall contain my name, followed by that of my said attorney and the designation "attorney-in-fact".

FURTHER, this power of attorney shall remain in full force and effect until the occurrence of the first of the following circumstances: (1) my death; (2) the death of my said attorney; (3) until the revocation of this power of attorney by me; or (4) until January 1, 1985.

NOTWITHSTANDING my insertion of a specified date of this power of attorney, IF on that specified expiration date, or if at any time within the thirty (30) days immediately preceding that specified expiration date, I should be or have been carried in a military status of "missing" or "missing in action" or "prisoner of war" THEN, this power of attorney shall automatically continue to remain valid and in full effect until sixty (60) days after my return to the continental United States or reassignment following termination of such "missing", "missing in action", or "prisoner of war" status.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 15th day of January, nineteen hundred and eighty-two.

WITNESSES:

Lisa L. Knight

William D. Macomber

[Signature]

[Signature] L.S.
Buddy Michael Allgood

ACKNOWLEDGMENT

STATE OF SOUTH CAROLINA

COUNTY OF GREENVILLE

I, the undersigned, do hereby certify that I am a duly commissioned, qualified, and authorized notary public in and for the STATE OF SOUTH CAROLINA; and that the grantor in the foregoing Power of Attorney, who is personally well known to me, appeared

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