

nature and however arising shall not in any manner limit any of the powers herein conferred upon my Attorney and it may perform any act which it is authorized to perform under this Power of Attorney, notwithstanding any such conflict of interest. I do hereby ratify and confirm all things so done by my said Attorney, within the scope of the authority herein given, as fully and to the same extent as if by me personally done and performed.

(24) This Power of Attorney shall not be affected by physical disability or mental incompetence of the principal which renders the principal incapable of managing her own estate. It is my intention that the authority conferred herein shall be exercisable notwithstanding my physical disability or mental incompetence.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 19th day of July, 1983.

Mary Louise Riley Cothran (LS)
MARY LOUISE RILEY COTHRAN

SIGNED, SEALED, PUBLISHED and DECLARED by MARY LOUISE RILEY COTHRAN, as and for the granting of her Power of Attorney in the presence of us, who, in the presence of said principal, MARY LOUISE RILEY COTHRAN, and at her request, and in the presence of each other, have hereunto set our names as attesting witnesses.

WITNESSES:

Laura Vairo

Elizabeth M. Alewife

Stephen B. Kunk

* * * * *

STATE OF SOUTH CAROLINA)
COUNTY OF GREENVILLE)

PROBATE

PERSONALLY appeared before me, the undersigned witness, and made oath that (s)he saw the within named MARY LOUISE RILEY COTHRAN, sign, seal and as her act and deed deliver the within written Power of Attorney, and that (s)he, with the other witness subscribed above, witnessed the execution thereof.

SWORN TO before me this 19th day)
of July, 1983.)

Stephen B. Kunk (LS)
Notary Public for South Carolina
My Commission Expires: 5/31/89)

Elizabeth M. Alewife

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Recorded July 20, 1983 at 10:45 A.M.