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STATE OF SOUTH CAROLINA

COUNTY OF

**GREENVILLE** 

CONTROL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS that as principal, I, FLORENCE WADE ANDERSON, a resident of the state and county aforesaid, have made, constituted and appointed and by these presents do make, constitute and appoint THE SOUTH CAROLINA NATIONAL BANK, Greenville, South Carolina, my true and lawful attorney ("Attorney") for the purposes hereinafter set forth.

## W I T N E S S E T H :

WHEREAS, I have heretofore created a trust (the "Trust") by agreement dated April 2, 1971, with The South Carolina National Bank as trustee (the "Trustee") which trust contains provisions permitting the Trustee, among other things, to manage my property and income for my benefit, and

WHEREAS, I desire to provide a means by which my property and income not heretofore assigned or transferred to the Trust may be assigned or transferred to the Trust, and

WHEREAS, Attorney has agreed to act and serve hereunder in accordance with the terms hereof.

NOW, THEREFORE, THIS SPECIAL POWER OF ATTORNEY:

## 1. Empowerment of Attorney

Attorney is authorized from time to time and at any time (and regardless of whether I am mentally incompetent or physically or mentally disabled or incapable of managing my property and income) as follows:

- (a) In Attorney's sole discretion, to convey, assign and transfer to the Trustee all or any part of my property and income of every kind and description, real, personal, intangible or mixed, wherever located, and whether acquired before or after the execution of this Special Power of Attorney, said property and income to be held, administered and distributed in accordance with the terms of the Trust.
- (b) In Attorney's sole discretion, to assign to the Trust presently and prospectively (or designated Trustee as beneficiary) the proceeds of any policies of insurance which I may now or hereafter become entitled to receive, including but not limited to insurance proceeds payable by reason of my disability, the said proceeds to be held, administered and distributed in accordance with the terms of the Trust.

## 2. Resignation and Revocation

- (a) This power of attorney shall not be affected by physical disability or mental incompetence of the principal which renders the principal incapable of managing his own estate. It is my intent that the authority conferred herein shall be exercisable notwithstanding my physical disability or mental incompetence.
- (b) This power of attorney shall remain in full force and effect until the earlier of the following events: (i) Attorney has resigned as provided herein, (ii) I have revoked this Special Power of Attorney by written instrument recorded in the public records of the county aforesaid, or (iii) a committee shall have been appointed for me by a court of competent jurisdiction.

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