

with full power of substitution and revocation, hereby ratifying and confirming all that my said attorney may do pursuant to this power. I hereby revoke all power of attorney heretofore previously granted by me. 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.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 28th day of July, 1983

[Signature] (L.S.)
JAMES SHAMLEY

Sealed and delivered in the presence of the three below subscribing witness in the presence of each other.

[Signature]
[Signature]
[Signature]
STATE OF SOUTH CAROLINA
COUNTY OF GREENVILLE

PERSONALLY APPEARED before me the undersigned witness and made oath that he saw the within named JAMES SHAMLEY sign, seal and as her act and deed deliver the within Power of Attorney and that he with the other witnesses subscribed above, witnessed the execution thereof.

[Signature]

SWORN TO before me this 28 day of July, 1983.

[Signature] (L.S.)
Notary Public for South Carolina
My Commission Expires: 5/1/84

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