11. The covenants herein contained shall bind, and the benefits and advantages shall inure to, the respective heirs, executors, administrators, successors, and assigns of the parties hereto. Whenever used, the singular number shall include the plural, the plural the singular, and the use of any gender shall be applicable to all genders.

| WITNESS                 | S my hand and se                      | al this 30t                | h day c        | of Ju                | ne .   | •           | 197           | 0             |            |
|-------------------------|---------------------------------------|----------------------------|----------------|----------------------|--|-------------|---------------|---------------|------------|
| Signed, scaled,         | and delivered.                        |                            |                |                      | Doros  | Thu 2       | h.Ra          | per (SE       | :AT        |
| in the presence         |                                       |                            |                |                      |  |             | (             | (SE           |            |
| Saint C                 | sh Sual                               | lletran                    | e Zu           |                      |  |             |               | (SE           |            |
| Mina                    | D. 3                                  | loward                     | 2              |                      |  |             |               | (SE           |            |
| · . J                   | . 1                                   |                            |                |                      |  |             | •             | (0)           |            |
| •                       | , , , , , , , , , , , , , , , , , , , | •                          |                |                      |  | •           | •             |               |            |
|                         |                                       |                            |                | ·                    |  |             | •             |               |            |
|                         |                                       |                            |                |                      | •  |             |               |               |            |
| STATE OF SO             | OUTH CAROLII                          | NT A                       |                | )                    |  |             |               |               |            |
| COUNTY OF               |                                       | MA                         |                | }                    | PROBATE  |             |               |               |            |
|                         | •                                     | •                          |                | ,                    |  | •           |               |               |            |
| Personally              | appeared the un                       | dersigned w                | itness and     | made o               | oath that (s)h   | e saw the   | within nam    | ed mortgagor  | r(s)       |
| other witness s         | as the Mortgagor<br>subscribed above  | (s) act and<br>, witnessed | the execu      | iver ine<br>tion the | within writter<br>ereof.   | n instrume  | nt and tha    | t (s)he, with | the        |
|                         | ·<br>•                                | ,                          | ,              |                      | M  | 1100        | 2             | 2/201         | a B        |
| ~~TARY~~                | -                                     |                            |                |                      |  | Jun-        | <u> </u>      | 24000         | <i>37C</i> |
| SWORN to bef            | ore me this 30                        | th                         | day            |                      |  |             |               |               |            |
| ot nigge                | 19 7                                  | 0                          |                |                      |  |             |               |               |            |
| Their a                 | 1 (Minus                              | chaum                      | تية<br>=(SEAL) |                      |  | ,           |               |               |            |
| Notary P                | ublic for South C                     |                            | =(SEAL)        |                      |  |             |               |               |            |
| My commis               | ssion expires                         | : May 13                   | , 1980         |                      |  |             |               |               |            |
|                         |                                       |                            |                |                      |  |             |               |               |            |
|                         | UTH CAROLIN                           | IA                         |                | l                    | PROBATE  |             | •             |               |            |
| COUNTY OF               | •                                     |                            |                | <b>\</b>             | INODALL  |             |               |               |            |
| Personally a            | ppeared the und                       | lersigned wi               | tness and      | made o               | ath that (s)he   | e saw the v | vithin nam    | ed Corporati  | on.        |
| by its duly author      | orized officers, si                   | gn, seal and               | as the me      | ortgago:             | r's act and de   | ed deliver  | within wr     | itten instrum | ent        |
| and that (s)he,         | with the other v                      | witness subs               | cribed abo     | ove, wit             | nessed the exe   | ecution the | ereof.        |               |            |
|                         |                                       |                            |                | •                    |  |             |               |               | _—         |
| SWORN to befo           | re me this                            |                            | day            |                      |  |             |               |               |            |
| of                      | , 19                                  | _                          | •              |                      |  |             |               |               |            |
|                         | , 19                                  | •                          |                |                      |  |             |               |               |            |
| Notary Pu               | blic for South Ca                     | rolina                     | (SEAL)         |                      |  |             |               |               |            |
|                         | Jona Oa                               |                            |                |                      |  |             |               |               |            |
| ž                       |                                       |                            |                |                      |  |             |               |               |            |
| STATE OF SOUTH CAROLINA |                                       |                            | 1              |                      | WOMAN MORT   |             | Soures        |               |            |
|                         |                                       |                            | Α.             | 1                    | and the state of t |             | 14 13 1/1/1/D |               |            |

COUNTY OF

I, the undersigned Notary Public, do hereby certify unto all whom it may concern, that the undersigned wife (wives) of the above named mortgagor(s) respectively, did this day appear before me, and each, upon being privately and separately examined by me, did declare that she does freely, voluntarily, and without any compulsion, dread or fear of any person whomsoever, renounce, release and forever relinquish unto SECURITY FEDERAL SAVINGS AND LOAN ASSOCIATION OF GREENVILLE, its successors and assigns, all her interest and estate, and all her right and claim of dower of, in and to all and singular the premises within mer tioned and released.

GIVEN under my hand and seal this

day of

19

Notary Public for South Carolina

Recorded July 1,,1970 at 12:05 P. M., #65.