Attorney may be dealing under this instrument.

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 26 day of September, 1984.

Faith E. Winter

SIGNED, SEALED, PUBLISHED, AND DECLARED by the above named Principal, FAITH E. WINTER, as and for her Power of Attorney in the sight and presence of us, who, at her request and in her presence and sight and in the sight and presence of each other, have hereunto signed our names as attesting witnesses.

Susan M. Whule Jaylors, Sc

STATE OF SOUTH CAROLINA

COUNTY OF GREENVILLE

PERSONALLY APPEARED before me the undersigned witness who, on oath, says that (s)he saw the within named FAITH E. WINTER sign, seal and as her act and deed deliver the foregoing Power of Attorney and (s)he with the other witness above witnessed the execution thereof.

Susan M. Which

SWORN to before me this

26 day of Sast , 1984.

My Commission Expires: 2/12

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