

incompetence of the Principal which renders the Principal incapable of managing his/her own estate. It is my intent that the authority conferred herein upon my Attorney, shall be exercisable notwithstanding my physical disability or mental incompetence.

3.2 Termination and Amendment. This power of attorney shall remain in full force and effect until the earlier of the following events:

- (a) My Attorney has resigned as provided herein;
- (b) I have revoked this power of attorney by written instruction recorded in the public records aforesaid.

This power of attorney may be amended by me at any time and from time to time, but such amendment shall not be effective as to third persons dealing with my Attorney without notice of such amendment unless such amendment shall have been recorded in the public records of the county aforesaid.

3.3 Resignation. In the event that my Attorney shall become unable or unwilling to serve or continue to serve, then my Attorney may resign by delivering to me, and simultaneously to the successor Attorney as provided herein, if any, in writing a copy of the resignation and by recording the original resignation in the public records of the county aforesaid. Upon such resignation and recording, said Attorney shall be divested of all authority under this power of attorney.

3.4 Removal. Any person named herein as Attorney may be removed by written instrument executed by me and recorded in the public records of the county aforesaid.

ITEM IV. INCIDENTAL POWERS AND BINDING EFFECT

In connection with the exercise of the powers herein described, Attorney is fully authorized and empowered to perform any other acts or things necessary, appropriate, or incidental thereto, with the same validity and effect as if I were personally present, competent, and personally exercised the powers myself. All acts lawfully done by my Attorney hereunder during any period of my disability or mental incompetence shall have the same effect and inure to the benefit of and bind me and my heirs, devisees, legatees and personal representative as if I were mentally competent and not disabled. The powers herein conferred may be exercised by my Attorney alone and the signature or act of my Attorney on my behalf may be accepted by third persons as fully authorized by me and with the same force and effect as if done under my hand and seal and as if I were present in person, acting on my own behalf and competent. No person who may act in reliance upon the representations of my Attorney for the scope of authority granted to my Attorney shall incur any liability to me or to my estate as a result of permitting my Attorney to exercise any power, nor shall any person dealing with my Attorney be responsible to determine or insure the proper application of funds or property.

ITEM V. MISCELLANEOUS

5.1 Exculpation. My Attorney, Attorney's heirs, successors and assigns are hereby released and forever discharged from any and all liability upon any claim or demand of any nature whatsoever by me, my heirs or assigns, the beneficiaries under my will or under any trust which I have created or shall hereafter create

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