

GENERAL DURABLE POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS:

I, Myrick den Hartog, of 106 E. Main, Jamesport, Missouri, hereby make, constitute and appoint Reike T. Plecas, of 4420 Ashworth Road, West Des Moines, Iowa 50265, as my attorney-in-fact to take the actions set forth in this instrument. In the event that he becomes unable or unwilling to act as my attorney-in-fact for any reason, then I hereby make, constitute and appoint Michael W. den Hartog, of 18316 Oriole, Fort Meyers, Florida 33967, as my attorney-in-fact to take the actions set forth in this instrument. This instrument is effective immediately.

If it should become necessary for the court to appoint a guardian of my person or a conservator of my estate, then I nominate Reike T. Plecas, as the same. In the event that he becomes unable or refuses to act as my guardian or conservator for any reason, then I hereby nominate Michael W. den Hartog, to act in that capacity.

I further appoint the person named above as my Attorney in Fact pursuant to Chapter 194.119 of the Revised Statutes of Missouri and grant him/her the Right of Sepulcher over my body after my death, to be designated "next-of-kin" under Missouri Law and to have the power of custody, control and disposition of my remains.

Any third person, if acting in good faith, may rely and act on the instruction of and deal with either of the above-named attorney-in-fact designated as my true and lawful attorney upon his/her representation that he/she has become my attorney-in-fact under this instrument and upon receipt of a photocopy of this instrument. Any such third person need not make any independent investigation of the facts involved or whether this instrument is still in effect. Any such third party acting in accordance with said attorney-in-fact's instructions is hereby absolved from any liability to me or my successors in interest.

My attorney-in-fact is hereby authorized as my true and lawful attorney with general powers to act in a fiduciary capacity on my behalf with respect to all lawful subjects and purposes in reliance upon and in accordance with the provisions of the Durable Power of Attorney Law in Section 404.710, RSMo, to generally manage my business and personal affairs, and to make legally binding decisions, as my authorized agent, in any business or legal transaction in which I am or may be an interested party. Without limiting the general powers granted herein, my attorney-in-fact has the following specific powers:

1. **Financial Institutions:** To open and close accounts in any financial institution; to endorse checks and other financial instruments on which I am a named payee, including checks drawn on the United States Treasury and issued for Social Security, Medicare, Medicaid, federal income tax refunds, federal farm programs, Veterans benefits, or any other federal programs, except that this power of attorney is not given to carry into effect an assignment to the attorney, or to any other person, of the right of the

undersigned to receive the above-described payments; to write checks and to use for me any bill payment service; to make deposits; to withdraw funds from all accounts and certificates of deposit; to have unlimited access as my deputy to any safe deposit box; and to arrange for any loan, bill payment, custodial, trust or other service from a financial institution.

2. **Brokers and Transfer Agents:** To manage my investments in securities; to open and close brokerage accounts; to buy and sell securities and mutual funds; to assign and deliver security certificates; and to deal with any dividend reinvestment plan.
3. **Insurance:** To act as my agent in all matters involving insurance, including Medicare and medical, hospitalization, liability, casualty or life insurance policies, annuity contracts and other insurance industry services; and to pay premiums, file claims and make proof of loss.
4. **Real Estate:** To rent, buy, maintain, manage, sell and lease interests in real estate.
5. **Personal Property:** To rent, buy, maintain, sell, lease and dispose of all types of tangible personal property, including motor vehicles and vessels; to provide for the inspection and licensing thereof; and to assign certificates of title or ownership therefore.
6. **Loans:** To borrow money in my name and give security interests in any real or personal property, securities or financial account.
7. **Mail and Transportation:** To receive registered, certified, and insured mail, packages and communications; and to arrange for shipment of my household goods and property.
8. **Voting Rights:** To exercise voting rights and execute proxies respecting securities.
9. **Services:** To contract for assistance in legal, tax, bookkeeping and investment matters; to obtain services to manage and maintain real or personal property; and to obtain housekeeping, nursing, custodial care and other personal services.
10. **Lawsuits and Claims:** To initiate, defend, and settle claims and lawsuits, including tax cases, prior to suit being filed or after litigation has commenced, including arbitration or other alternative disputes resolution proceedings; and to give releases from liability.
11. **Fiduciaries:** To have priority to be appointed my guardian or conservator; and to exercise any right I have to designate any person, including my attorney in fact, initial, successor or substitute guardian, conservator, trustee or custodian; to remove a trustee or custodian; or to amend the administrative provisions of any trust or custodial agreement that I may amend.

12. **Taxes:** To file any tax rendition, return, protest or claim for refund; to handle any notice of tax deficiency or audit and to agree to settlement; to make any election on my behalf in connection with any tax matter; to receive confidential information from any taxing authority; and to represent me before the Internal Revenue Service.

13. **Government Benefit:** To apply for any government insurance, welfare, Social Security, Medicare, civil service, military, forestry, agricultural, or other benefit, pension, loan, grant or subsidy; to receive personal, confidential and medical information from any state or federal agency; to sign any receipts, program agreements or documents; and to receive, endorse, and collect checks payable to me, drawn on the United States Treasury and issued for welfare, Social Security, Medicare, civil service, military, forestry, agricultural, or other benefit, pension, loan, grant or subsidy. This power of attorney is not given to carry into effect an assignment to the attorney, or to any other person, of my right to receive the above-described payments.

14. **Trusts and Custodianships:** To transfer and deliver any money or property of mine to an inter vivos trust created by me, to a trust established for me, or to my attorney in fact or another person to hold for me as beneficiary under the Missouri Personal Custodian Law; and to deliver a gift to any person, including my attorney-in-fact, as custodian for a minor or disabled adult person under the Missouri custodianship laws or similar laws of any other state.

15. **Estate and Tax Planning and Gifts:** To establish, change or revoke survivorship rights in property or accounts, beneficiary designations for life insurance, IRA and other contracts and plans, and registrations in beneficiary form; to establish ownership of property or accounts in my name as tenant by the entirety or with others in joint tenancy with rights of survivorship or with others as tenants in common, and to exercise any right I have in joint property, including a severance of interests; to exercise or decline to exercise any power given to me to appoint property; to exercise any powers received or reserved by me, including general, limited or special powers of appointment and the power to withdraw property from a trust; to disclaim or renounce transfers to me of property; to make inter vivos gifts of my property to persons, including my attorney in fact, but the gifts to my attorney in fact shall not exceed in value the gifts made to my other children; and to make contributions to my Church and other religious, charitable and educational organizations.

16. **Trustee of Trusts:** To act for me as trustee of any trust for which I am trustee and to exercise all authority and powers granted to me as trustee under the provisions of the trust instrument.

17. **Medical Treatment:** To give consent to or prohibit any type of health care, medical care, treatment or procedure to the extent authorized by Sections 404.800 to 404.865, RSMo, and to make decisions regarding medical attention and services for me. These shall include, but not be limited to:

- a. Choice of physician and choice of hospital or nursing home.

b. The unrestricted power to determine, upon advice of a physician, whether I am in need of surgery or medication.

c. The absolute and sole discretion to authorize or withhold such surgery or medication.

d. Any decision concerning other care, comfort, maintenance, and support as my Agent may determine, including the power to exercise any written consents or approvals which may at any time be required with respect to any such medical decisions regarding my physical or mental condition.

Pursuant to Section 404.825, RSMo, this provision shall become effective upon the certification of incapacity by one physician.

18. **Right to Appoint Successor.** To designate one or more substitute or successor or additional attorneys in fact.

19. **General Powers.** To exercise any of the powers granted to trustees under Section 456.8 – 815 and 456.8 - 816 of the Missouri Revised Statutes.

20. **POWERS RESTRICTED BY STATUTE UNLESS ENUMERATED.** Also, my attorney-in-fact, pursuant to subsection 6, of Section 404.710, RSMo. of said Act, is specifically authorized, to carry out the following actions for me and in my behalf:

1. To execute, amend or revoke any Trust Agreement;
2. To fund with my assets any Trust not created by me;
3. To make or revoke a gift of my property in trust or otherwise;
4. To disclaim a gift or devise of property to or for my benefit;
5. To create or change survivorship interests in my property or in property in which I may have an interest; provided, however, that the inclusion of the authority set out in this paragraph shall not be necessary in order to grant to an attorney in fact acting under a power of attorney granting general powers with respect to all lawful subjects and purposes the authority to withdraw funds or other property from any account, contract or other similar arrangement held in my name and one or more other persons with any financial institution, brokerage company or other depository to the same extent that I would be authorized to do if I were present, not disabled or incapacitated, and seeking to act in my own behalf;
6. To designate or change the designation of beneficiaries to receive any property, benefit or contract right on my death;
7. To give or withhold consent to an autopsy or postmortem examination;
8. To make a gift of, or decline to make a gift of, my body parts under the Uniform Anatomical Gift Act;
9. To nominate a guardian or conservator for me; and if so stated in this power of attorney, the attorney-in-fact may nominate himself as such;
10. To give consent to or prohibit any type of health care, medical care, treatment or procedure to the extent authorized by Sections 404.800 to 404.865; or
11. To designate one or more substitute or successor or additional attorneys in fact.

MEDICAL DECISIONS. The authorizations and authority granted in this General Durable Power of Attorney shall specifically include the power to direct providers of health care to limit or withhold life support measures of the kind sometimes referred to as "heroic" or "extraordinary" where it is determined by my said attorney-in-fact, after consulting with medical advisers, that there is no reasonable possibility that I can thereafter gain any meaningful existence. In the event of such determination, this authority shall include (but not be limited to) each of the following:

a. If my physician believes that a certain medical treatment may provide me with comfort, relieve pain or lead to a significant recovery, my attorney-in-fact shall direct my physician to try such treatment for a reasonable period of time; if such treatment does not improve my condition, provide comfort or relieve pain, my attorney-in-fact shall then direct that the treatment be withdrawn, even if so doing shortens my life.

b. My attorney-in-fact is empowered to direct the termination of any or all life sustaining or death prolonging procedures and/or other administration of medication and medical procedures even after the same have been commenced, even if so doing shortens my life.

c. My attorney-in-fact is empowered to authorize and direct the administration to me of medical treatment (including drugs) if my physician believes that such treatment may relieve pain or provide me comfort or provide for the reduction or control of pain, even if such treatment might shorten my life, suppress my appetite or my breathing, or be habit-forming.

d. My attorney-in-fact may exercise these powers with respect to medical decisions upon the certification of incapacity by one licensed physician as is set forth and required in Section 404.825 RSMo.

I hereby exonerate all parties involved in such actions (or decisions not to act) from any and all liability, civil or criminal, as a result thereof, and I direct that my estate shall hold all such parties harmless and indemnify each and all of them from any such liability.

ACCESS TO MEDICAL INFORMATION. My attorney-in-fact is fully authorized (to the same extent that I would be if present and not acting under any disability) to have complete access to, and to give consent and authorization for me and in my name to the disclosure of, any or all confidential or privileged information or communication (regardless of the kind or type; and regardless of whether in written, printed, electronic, video type or audio tape form), to request and receive any and all records or other documents (or copies of same) or other information however preserved under my control or to which I would personally have access or relating to my personal or medical affairs or to my medical, physical, psychiatric or mental condition, treatment, diagnosis, prognosis or evaluation of every kind and character (whether confidential or otherwise). I specifically waive the protection of any law, federal or state, which requires that records and other information pertaining to me and to my care remain confidential to the exclusion of my attorney-in-fact, and my attorney-in-fact shall have full access to all such information. I do this having full confidence in my attorney-in-fact and knowing that my attorney-in-fact may not be able to carry out the duties imposed upon by said

attorney-in-fact by this document without having access to the documents above described. All persons or other entities having control of any personal information concerning me and/or my health care are specifically directed to reveal all such information to or at the direction of my attorney-in-fact whenever requested by my attorney-in-fact. **My attorney-in-fact shall have the power and authority to serve as my Personal Representative for purposes of HIPAA [45 CFR 164.502g].**

DIGITAL ASSETS. My attorney-in-fact shall have (i) the power to access, use and control my digital devices, including but not limited to, desktops, laptops, tablets, peripherals, storage devices, mobile telephones, smartphones, and any similar digital device which currently exists or may exist as technology develops or such comparable items as technology develops for the purpose of accessing, modifying, deleting, controlling or transferring my digital assets, and (ii) the power to access, modify, delete, control and transfer my digital assets, including but not limited to, my emails received, email accounts, digital music, digital photographs, digital videos, software licenses, social network accounts, file sharing accounts, financial accounts, domain registrations, DNS service accounts, web hosting accounts, tax preparation service accounts, online stores, affiliate programs, other online accounts and similar digital items which currently exist or may exist as technology develops or such comparable items as technology develops.

REMUNERATION. My attorney-in-fact appointed pursuant to this Power of Attorney (whether one or more) is specifically authorized to pay reasonable compensation to himself/herself and/or to persons assisting said attorney-in-fact, including reimbursement for expenses paid or incurred by my said attorney-in-fact. Such payments shall be made out of any of my funds which are under the control of my said attorney-in-fact.

INDEMNITY. Any of the above-named attorneys-in-fact shall be indemnified from any and all liability from any claim that may be brought or threatened against any such person, including all attorney fees, arising out of any action or withholding of action that any such attorney-in-fact may take or refrain from taking pursuant to this instrument, as long as my attorney-in-fact shall have acted in good faith. This indemnity shall include any and all persons associated with any attorney in fact against whom any claim may be made on account of actions or inactions taken pursuant to this instrument.

THIS IS A DURABLE POWER OF ATTORNEY AND THE AUTHORITY OF MY ATTORNEY IN FACT SHALL NOT TERMINATE IF I BECOME DISABLED OR INCAPACITATED OR IN THE EVENT OF LATER UNCERTAINTY AS TO WHETHER I AM DEAD OR ALIVE.

COUNTERPARTS. This instrument may be executed in any number of counterparts, and all of said counterparts shall constitute but one and the same instrument.

CONSTRUCTION. For construction purposes, throughout this instrument the masculine gender shall include the feminine and neuter genders, the singular the plural and vice versa.

ANY PERSON RELYING ON THIS POWER OF ATTORNEY MAY RELY ON A PHOTOCOPY OF IT AS IF IT WERE AN ORIGINAL.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 1st day of July, 2016.

Myrick den Hartog
Myrick den Hartog

WITNESSES:

Debbie Hartwig
Debbie Hartwig

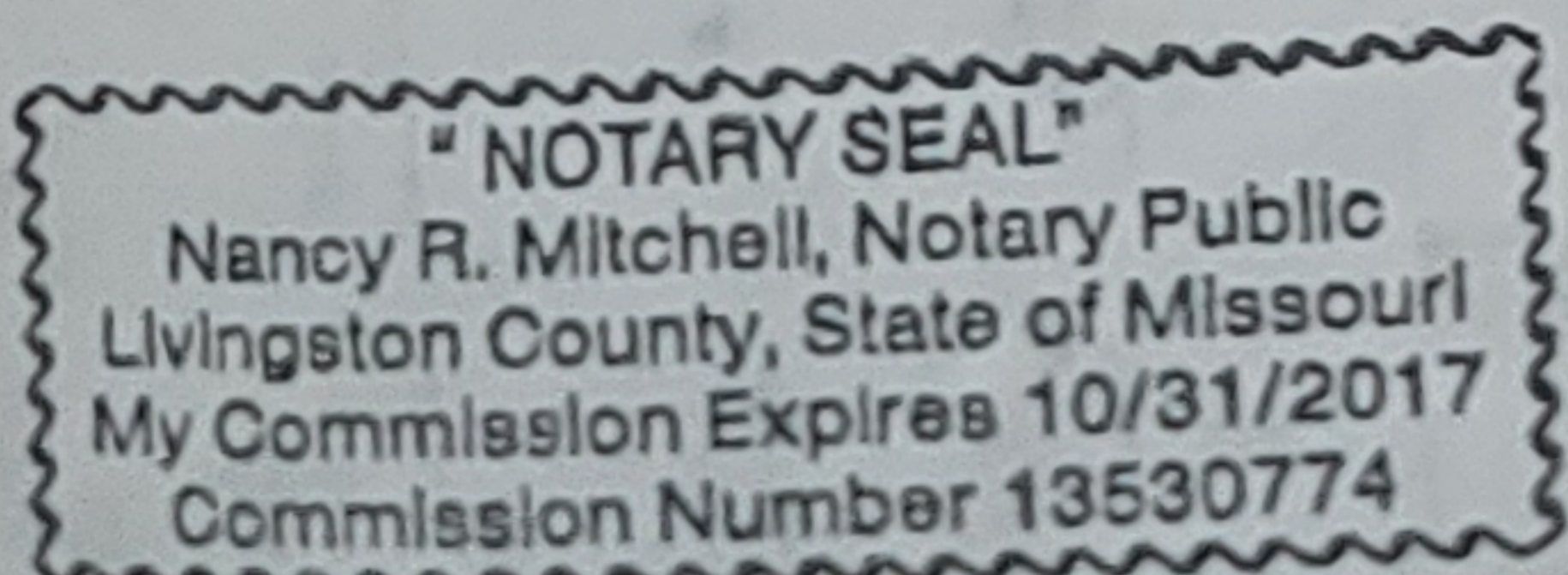
Trentis E. Miller
Trentis E. Miller

STATE OF MISSOURI)
) ss.
COUNTY OF LIVINGSTON)

On this 1st day of July, 2016, before me personally appeared Myrick den Hartog, to me known to be the person described in and who executed the foregoing document, and acknowledged that he executed the same as his free act and deed.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal at my office, the day and year first above written.

Nancy R. Mitchell
Nancy R. Mitchell
Notary Public



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MD