

LIMITED DURABLE POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: The undersigned, ("Grantor(s)"), being of legal age, DO(ES) HEREBY CONSTITUTE and appoint Mary Baker, an authorized agent of Sonoco Closing Firm, LLC, (Grantee), also of legal age, as Grantor(s) true and lawful attorney-in-fact for and on behalf and in Grantor(s) name, place and stead, for my property listed below if which I am in legal possession.

Resort: WyndSample Account Number: 9999999999

To perform any and all acts necessary to convey the real and personal property. This power includes but is not limited to contacting the resort on Grantor(s) behalf, making inquiries into the status of accounts affecting this property, making reservations, banking weeks, ordering death certificates, collecting proceeds, executing any and all documents, notarial or otherwise, in the names written below or in other form and all other issues that are deemed necessary in Grantee's discretion to carry out the transfer, surrender, and/or cancellation of said property.

The power shall not be affected by the disability of the Grantor(s). Grantee has the power to perform all and any act and thing fully and to the same extent as the Grantor(s) could do if personally present, with full power of substitution and revocation.

As the undersigned, I/We authorize the management of the referenced property to provide any and all information regarding my/our contract with the above references to the Grantee. AND THE GRANTOR(S) DO(ES) HEREBY RATIFY AND CONFIRM all whatsoever that the said attorney-in-fact or duly appointed substitute shall do or cause to be done by virtue of the powers hereby granted.

IN WITNESS WHEREOF the said Grantor(s) have signed these presents
this ____ day of _____, _____.

First Witness Signature

Printed Name: _____

Jane A. Doe (Grantor)

Second Witness Signature

Printed Name: _____

John D. Doe (Grantor)

STATE OF _____)

COUNTY OF _____)

On this ____ day of _____, _____, before me,
_____ a Notary Public, personally appeared
_____ who proved to me on the basis of
satisfactory evidence to be the person(s) whose names(s) is/are
subscribed to the within instrument and made acknowledgment to me that
he/she/they executed the same in his/her/their authorized capacity(ies),
and that by his/her/their signatures on the instrument the person(s) or the
entity upon behalf of which the persons acted executed the instrument.

**I certify under PENALTY OF PERJURY under the laws of the State and
County noted above that the paragraph is true and correct.**

Witness my hand and official seal.

(This area for official notarial seal)

Notary Signature

Notary Printed Name: _____

My Commission expires: _____