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POWER OF ATTORNEY

I agree to become a Limited Partner of M & M ASSOCIATES and be bound by all of the terms and conditions of the Agreement of Limited Partnership of M & M ASSOCIATES as amended.

I hereby irrevocably constitute and appoint each General Partner of M & M ASSOCIATES, with full power of substitution, my true and lawful Attorney-in-Fact, in my name, place and stead, with full power to act jointly and severally, to make, execute, sign, acknowledge, swear to, verify, delivery, file, record and publish: (a) Certificate of Limited Partners; (b) any other certificate, instrument or document which the General Partners may believe is necessary or appropriate to be filed by the Partnership under the laws of any state or by any governmental agency; (c) any certificate, instrument or document which may be required to effect the continuation of the Partnership, the admission of a Limited Partner, or the dissolution and termination of the Partnership, provided such continuation, admission, dissolution and termination is in accordance with the terms of the Partnership Agreement; and (d) subject to the provisions of Article II of the Partnership Agreement, any documents necessary or appropriate for the disposition of my Partnership interest in the event of default by me in my obligation to contribute any installment of my Capital Contribution.

This Power of Attorney is coupled with an interest, and it shall survive the assignment by me of all or any portion of my interest in M & M ASSOCIATES, except that, where the transferee of my interest has been approved by the General Partners for admission to the Partnership as a Substitute Limited Partner, this Power of Attorney shall survive such transfer for the sole purpose of enabling the General Partners to execute, acknowledge and file any instrument or document necessary to effect such substitution.

ATTEST:

By: Gold William

President

President

ADDRESS:

4/47 SE DIVISION

Number and Street

Port Lond DR 97206

City, State and Zip Code

BOOK 1418P1065

COUNTY OF DAVIE	
I, a Notary Public of the County and State aforesaid, certify that GENE IN. DIETZ MAN acknowledged that (*) he is the Secretary of KLS acknowledged that (*) he is the Secretary of KLS MANAGEMENT, an OREGS MANAGEMENT, an OREGS Corporation, and that by authority composition, the foregoing instrument was signed in its name by its President, sealed with its Corporate Seal and attested by Dense M. Dietz	ty nt te
My commission expires:	
NOTARIAL SEAL OFFICIAL SEAL OFFICIAL SEAL Notary Public, First Carolina County of Davis JAN P. ANDERS My commission expires April 14, 1985	

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STATE OF NORTH CARO	LINA—Forsyth County exed) certificate of (there gi	N P. Orders (Midua), No over name and official title of the officer signing the certificate, passed upon	<u>(m)</u>
is (are) certified to be correct	ct. This the day of	november 19 83.	
·	PRESENTED FOR REGISTRATION AND RECORDED	Eunice Ayers, Register of Deeds By Xathy Mulc Deputy-Assistan	ŧ
Probate fee \$1.00 paid.	New 9 4 06 PM '83		
	EUNICE AYERS REGISTER OF DEEDS FORSYTH CTY.N.C.		
	5.50 pd 14C	BOOK 1418P1066	

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