

STATE OF MISSISSIPPI)
DESOTO COUNTY)

SPECIFIC LIMITED DURABLE POWER OF ATTORNEY

I, ~~MALENA~~^{MB} BELL, a married Woman, do hereby make and grant a specific limited durable power of attorney to my father-in-law, JOHN C. BELL, and appoint and constitute said individual as my attorney-in-fact to facilitate and effectuate the mortgage of the real property located in DeSoto County, Mississippi, located at 1798 Manor Place Drive, Hernando, MS 38632, more particularly described as follows:

Lot 44, Magnolia Manor Subdivision, located in Sections 12 and 13, Township 3 South, Range 8 West, DeSoto County, Mississippi, as recorded in Plat Book 93, Pages 35-41 in the Office of the Chancery Clerk of DeSoto County, Mississippi.

I more specifically direct that John C. Bell, be authorized to execute for me, on my behalf to the same extent as if I had done so personally, all documents related to the mortgage of the above described property, including but not limited to, contracts of sale, bills of sale, notes, checks, drafts, deeds, closing documents, real estate listings and any other documents necessary for the refinance mortgage of my real property described above. I further direct that John C. Bell, be authorized to exercise or perform any act, power, duty, right or obligation whatsoever that I now have, or may hereafter acquire the legal right, power or capacity to exercise or perform, in connection with, arising from, or relating to the above-described property. Further, I specifically direct that John C. Bell, be authorized to execute for me all loan documents for a loan with NYCB Mortgage Company, LLC, its successors and/or assigns, or any other lender, with the loan amount not to exceed \$175,000.00.

I grant to my said Attorney in Fact full power and authority to do, take, and perform all and every act and thing whatsoever requisite, proper, or necessary to be done, in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that my said Attorney in Fact shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.

Nations Direct Title
UPS

This power of attorney shall remain in full force and effect and shall not be affected by my incompetency, incapacity or disability, it being my intent that the power granted herein shall continue without interruption until my death unless previously revoked by me. Any person dealing with my attorneys may rely without inquiry upon the certification of my attorneys that this power of attorney has not been revoked. This power of attorney shall terminate on December 31, 2011.

This 07th day of February, 2011.

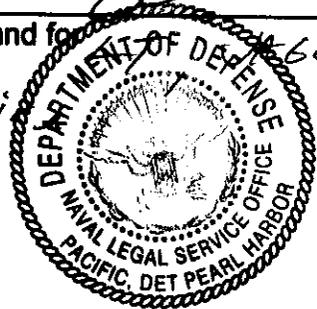
Malena Bell
MALENA BELL

STATE OF _____)
COUNTY OF _____)

I, the undersigned Notary Public in and for said County, in said State, hereby certify that MALENA BELL, whose name is signed to the foregoing document, and who is known to me, acknowledged before me on this day that, being informed of the contents of the document, he executed the same voluntarily and with full knowledge of its contents.

Given under my hand and official seal this 07th day of February 2011

[Signature]
Notary Public in and for
the State of _____
My Commission Expires: Does Not Expire



THIS INSTRUMENT PREPARED BY:
SUE ANNE DAY
NATIONS DIRECT TITLE AGENCY
1100 OCEAN SHORE BLVD.
ORMOND BEACH, FL 32176
AM-BELL-DEWAYNE