

Power of Attorney

Know All Men By These Presents:

That **LLOYD A. THOLA, SR.**

whose mailing address is:

has made, constituted and appointed, and by these presents does make, constitute and appoint **MARION F. CHARLES,** whose mailing address is:
ROUTE 1, BOX 10, COLESBURG, IOWA 52035,

HIS true and lawful attorney for himself and in his name, place and stead, including full power and authority to improve, protect, conserve, sell, lease, mortgage, encumber and otherwise manage and dispose of any and all real or personal property or any part thereof;

giving and granting unto **MARION F. CHARLES,** said attorney full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises as fully, to all intents and purposes, as he might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that **MARION F. CHARLES** has done pursuant to Power of Attorney dated July 11, 1986, including the execution of Contract for Sale and Purchase executed by said attorney dated May 28, 1992, said attorney or his substitute shall lawfully do or cause to be done by virtue hereof.

In Witness Whereof.

I have hereunto set my hand and seal the 3 day of September, in the year one thousand nine hundred and NINETY-TWO.

Sealed and delivered in the presence of
(TWO SEPARATE WITNESSES REQUIRED)

Edwin Paul Schneider
PRINTED NAME: EDWIN P. SCHNEIDER

Glen W. Marsh
PRINTED NAME: GLEN W. MARSH

State of Minnesota
County of St. Louis

Widow's Friend's Y.C.C. 1-207
Lloyd A. Thola, Sr. (L.S.)
LLOYD A. THOLA, SR.

Be It Known, That on the 3 day of September one thousand nine hundred and ninety-two, before me, RITA M. OLSON, a Notary Public in and for the State of Minnesota, duly commissioned and sworn, dwelling in the City of Duluth, personally came and appeared **LLOYD A. THOLA, SR.** to me personally WHO PRESENTED Registration Number / Check PHOTO IDENTIFICATION, known, and known to me to be the same person described in and who executed the within power of attorney, and he acknowledged the within power of attorney to be his true act and deed.

In Testimony Whereof, I have hereunto subscribed my name and affixed my seal of office the day and year last above written.

MY COMMISSION EXPIRES: SEP 17 1995
(SEAL) NOTARY PUBLIC-MINNESOTA
ST. LOUIS COUNTY
MY COMMISSION EXPIRES JULY 17, 1995

Rita M. Olson (L.S.)
Notary Public
Printed Name: RITA M. OLSON