DURABLE POWER OF ATTORNEY

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KNOW ALL MEN BY THESE PRESENTS,

That I, William J. Frascogna, the undersigned Grantor,
(Grantor's Name)

of 85 Olympic Las Vegas, NV. 89109,
(Street Address/City/State/Zip)

does hereby grant a durable power of attorney to: JEANNETTE PRUDHOMME,
(Appointee's Name)

of 147 Colombia Las Vegas NV 89109, as my attorney-in-fact.
(Street Address/City/State/Zip)

My attorney-in-fact shall have full powers and authority to do and undertake all acts on my behalf that I could do personally including but not limited to the right to sell, deed, buy, trade, mortgage, assign, rent or dispose of any real or personal property; the right to execute, accept, undertake and perform all contracts in my name; the right to deposit, endorse, or withdraw funds to or from any of my bank accounts or safe deposit box; the right to borrow, collect, lend, invest or reinvest funds; the right to initiate, defend, commence or settle legal actions on my behalf; the right to vote (in person or by proxy) any shares or beneficial interest in any entity, and the right to retain any accountant, attorney or other advisor deemed necessary to protect my interests relative to any foregoing unlimited power. My attorney-in-fact shall have full power to execute, deliver and accept all documents and undertake all acts consistent with the foregoing.

This power of attorney shall become effective upon and remain in effect only during such time periods as I may be mentally or physically incapacitated and unable to care for my own needs or make competent decisions as are necessary to protect my interests or conduct my affairs.

My attorney-in-fact hereby accepts this appointment subject to its items and agrees to act and perform in said fiduciary capacity consistent with my best interests as he in his best discretion deems advisable, and I affirm and ratify all acts so undertaken.

This power of attorney may be revoked by me at any time, and shall automatically be revoked upon my death, provided any person relying on this power of attorney shall have full rights to accept the authority of my attorney of my attorney-in-fact until in receipt of actual notice of revocation.

I hereby agree to accept the appointment as attorney-in-fact, pursuant to the foregoing Power of Attorney.

Jeannette Prudhomme
Attorney-in-Fact Signature
JEANNETTE PRUDHOMME

In Witness Whereof, I/We have hereunto set my hand/our hands this 27 day of March, 19 92

William J. Frascogna
(Grantor's Signature)

WILLIAM J. FRASCOGNA
(Print or type name here)

(Grantor's Signature)

(Print or type name here)

return to:
Jeannette Prudhomme
147 Columbia
Las Vegas, NV 89109

STATE OF NEVADA }
COUNTY OF Clark }

On this 27 day of March, 19 92 personally appeared before me a Notary Public

WILLIAM J. FRASCOGNA Jeannette Prudhomme

personally known to me to be the person whose name(s) is subscribed to the above instrument who acknowledged that he/she executed the instrument.

Witness my hand and official seal

(Notary Public)

NOTARY PUBLIC
STATE OF NEVADA
County of Clark
MARY SHRIVER
My Appointment Expires August 16, 1993

STATE OF OREGON: COUNTY OF KLAMATH: ss.

Filed for record at request of Wm. L. Sisemore the 21st day of Aug. A.D., 19 92 at 9:23 o'clock A M., and duly recorded in Vol. M92, of Power of Attorney on Page 18891.

FEE $5.00

Evelyn Biehn · County Clerk
By Pauline Mullendore