

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, deliver, file, record and publish: (a) Certificate of Limited Partnership; (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 my death and 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

DATED:

DATED:

LAWRENCE N. SANO

Name (Please Print or Type)

ADDRESS:

31827 S. Kropf Rd.

Number and Street

Canby, Or. 97013

POOK 141861041

City, State and Zip Code

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STATE OF Ohe	901 :		
COUNTY OF	/ LON/ :		
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WITNESS my h. 1983	and and Notarial	Seal, this the 29	to day of June,
My commission exp	ires:	Eune Ell Notary P	ublic
NOTARIAL SEAL:	•		
FAZÉ OF NORTH CAROLINA			<u> </u>
TAZE OF NORTH CAROLINA The foregoing (or annexed)	certificate_of_Cu	Nee Ellett,) ive name and official title of the officer	1-P. Manconi Cd, signing the certificate_passed upon)
(are) certified to be correct. Th	is the ——day of	nov :	83
robate fee \$1.00 paid.	RESENTED FOR REGISTRATION AND RECORDED	Eunice Ayers, Register of D By Kathy Ku	
Nov	9 4 06 PM 183	U	

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EUNICE AYERS
REGISTER OF DEEDS
FORSYTH CTY. N.C.

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