

Durable Power of Attorney

KNOW ALL MEN BY THESE PRESENTS,

That I, Raymond G. Ulen, the undersigned Grantor,

(Grantor's Name)

of 3701 Topaz Ranch Dr, Wellington Nv, 89444

(Street Address/City/State/Zip)

do hereby appoint and grant a durable power of attorney to David T. Riffel

(Appointee's Name)

of 4550 So, Carson #30 Carson City Nv, 89701

(Street Address/City/State/Zip)

as my attorney in fact.

Granting to my appointed attorney-in-fact full power 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 acceptst his appointment subject to its items and agrees to act and perform in said fiduciary capacity consistent with my best interests as he/she in his/her 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 Durable Power of Attorney.

David T. Riffel
Attorney-in-Fact Signature
David T. Riffel

In Witness Whereof, I have hereunto set my hand this 8th day of December, 1999

RAY AG Ulen
(Grantor's Signature)
Raymond G. Ulen
(Print or type name here)

STATE OF NEVADA)
)
COUNTY OF DOUGLAS)

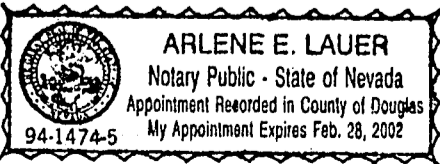
On this 8th day of Dec., 1999 personally appeared before me, a Notary Public,

Raymond G. Ulen and David T. Riffel

personally known to me to be the person whose name is subscribed to the above instrument who acknowledged that he executed the instrument.

Witness my hand and official seal
Arlene E. Lauer
(Notary Public)

(Notary Stamp)



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COPY

REQUESTED BY
David Riffel
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

1999 DEC -8 PM 12:46

LINDA SLATER
RECORDER

\$8.00 PAID KJ DEPUTY

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