

HARNETT COUNTY
OFFICE OF REGISTER OF DEEDS
 NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
 N.C. VITAL RECORDS

111

REGISTRATION DISTRICT NO. 043		LOCAL NO. 00		COUNTY OF DEATH Harnett		STATE FILE NO.	
DECEASED'S LEGAL NAME 1a. FIRST Robert		1b. MIDDLE Anthony		1c. LAST Tutor		1d. SUFFIX	
1e. LAST NAME PRIOR TO FIRST MARRIAGE		2a. SEX M		2b. AGE - LAST BIRTHDAY (Yrs) 63		2c. UNDER 1 YEAR Married (Days) Hours Minutes	
2d. UNDER 1 YEAR Hours Minutes		3a. DATE OF BIRTH (Month/Day/Year) Oct. 9, 1957		3b. BIRTHPLACE (County/State or Foreign County) Wake, NC		3c. DATE OF DEATH (Month/Day/Year) January 30, 2021	
4. PLACE OF DEATH (Check only one) 4a. IF DEATH OCCURRED IN A HOSPITAL <input type="checkbox"/> Inpatient <input checked="" type="checkbox"/> ER/Outpatient <input type="checkbox"/> D/OA <input type="checkbox"/> Hospice facility <input type="checkbox"/> Nursing home/Long term care facility <input type="checkbox"/> Decedent's home <input type="checkbox"/> Other (Specify)							
5. FACILITY NAME (If not institution, give street and number) Central Harnett Hospital							
6. MARITAL STATUS <input type="checkbox"/> Married <input type="checkbox"/> Married, but separated <input type="checkbox"/> Widowed <input checked="" type="checkbox"/> Divorced <input type="checkbox"/> Never married		7. SURVIVING SPOUSE (Give name prior to first marriage) Lillington		8. COUNTY OF DEATH Harnett		9. DECEASED'S USUAL OCCUPATION (Do not use retired) Warehouse Associate	
10. SOCIAL SECURITY NUMBER 243-11-6331		11. RESIDENCE - STATE OR FOREIGN COUNTRY North Carolina		12. COUNTY Harnett		13. CITY OR TOWN Fuquay-Varina	
14. DECEASED'S EDUCATION (Check the box that best describes the highest degree or level of school completed at the time of death) <input type="checkbox"/> 8th grade or less <input type="checkbox"/> 9th-12th grade; no diploma <input type="checkbox"/> High school graduate or GED completed <input type="checkbox"/> Some college credit, but no degree <input type="checkbox"/> Associate degree (e.g., AA, AS) <input type="checkbox"/> Bachelor's degree (e.g., BA, BS) <input type="checkbox"/> Master's degree (e.g., MA, MS, MEd, MDiv, MBA) <input type="checkbox"/> Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)		15. DECEASED OF HISPANIC ORIGIN (Check the box that best describes whether the decedent is Spanish/Hispanic/Latino. Check the "No" box if decedent is not Spanish/Hispanic/Latino) <input checked="" type="checkbox"/> No, not Spanish/Hispanic/Latino <input type="checkbox"/> Yes, Mexican, Mexican American, Chicano <input type="checkbox"/> Yes, Puerto Rican <input type="checkbox"/> Yes, Cuban <input type="checkbox"/> Yes, other Spanish/Hispanic/Latino (Specify)		16. DECEASED'S RACE (Check one or more boxes to indicate what the decedent considered himself or herself to be) <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native (Name of the enrolled or principal tribe) <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander (Specify)			
17. FATHER/PARENT NAME (First, Middle, Last) (Last Name Prior to First Marriage) Robert William Tutor		18. MOTHER/PARENT NAME (First, Middle, Last) (Last Name Prior to First Marriage) Barbara Ann Wilson		19. RELATIONSHIP TO DECEASED Sister		20. MAPPING ADDRESS (Street and Number, City, State, Zip Code) 3404 Piney Grove Wilbon Rd. Fuquay-Varina, NC 27526	
21. SIGNATURE OF FUNERAL DIRECTOR <i>Dean Family Cemetery</i>		22. LICENSE NUMBER FS-3107		23. NAME OF EMBALMER Stephen Reeves		24. LICENSE NUMBER EM-1642	
25. PART I. Enter the chain of events (absent, injured or complications) that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without knowing the etiology on line a, b and/or c. Enter only one cause on a line. DO NOT ABBREVIATE. IMMEDIATE CAUSE (Final disease or condition resulting in death) → atherosclerotic cardiovascular disease Secondary list conditions, if any leading to the cause listed on line a. Enter the UNDERLYING CAUSE (Disease or injury that initiated the events resulting in death) LAST → Stage 4 chronic kidney disease hyperkalemia PART II. Other medical conditions contributing to death but not resulting in the underlying cause given in PART I. → hyperlipidemia, nicotine use							
26. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accidental <input type="checkbox"/> Pending <input type="checkbox"/> Suicide <input type="checkbox"/> Cannot be determined		27. TIME OF DEATH (Approximate) 2326		28. DID TOBACCO USE CONTRIBUTE TO DEATH? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Probably <input type="checkbox"/> No <input type="checkbox"/> Unknown		29. IF FEMALE: <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Unknown if pregnant within the past year	
30. DATE PRONOUNCED (Month/Day/Year)		31. DATE OF INJURY (Month/Day/Year)		32. TIME OF INJURY		33. PLACE OF INJURY - at home, farm, street, factory, office, building, etc.	
34. DESCRIBE HOW INJURY OCCURRED		35. LOCATION OF INJURY (Street Number/City/State)		36. IF TRANSPORTATION INJURY - SPECIFY: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Passenger <input type="checkbox"/> Pedestrian <input type="checkbox"/> Other (Specify)		37. CERTIFIER (Check only one) <input type="checkbox"/> Certifying physician/nurse practitioner/physician assistant - To the best of my knowledge, death occurred at the time, date, and place, and due to the cause(s) and manner stated. <input checked="" type="checkbox"/> Medical Examiner - On the basis of examination, and/or investigation, in my opinion death occurred at the time, date, and place, and due to the cause(s) and manner stated.	
38. SIGNATURE AND TITLE OF CERTIFIER <i>J. Newman PA-C</i>		39. LICENSE NUMBER 0010-02821		40. DATE SIGNED (Month/Day/Year) 2/3/2021		41. DATE REGISTERED BY STATE	
42. NAME AND ADDRESS OF CERTIFIER (Print legibly) Jessica Newman 1617 N. Main St. Suite 100 Fuquay-Varina, NC 27526		43. DATE FILED (Month/Day/Year) 2/4/2021		44. DATE REGISTERED BY STATE		45. DATE AMENDED (Month/Day/Year)	
46. DATE CORRECTED (Month/Day/Year)		47. DATE AMENDED (Month/Day/Year)		48. ITEMS CORRECTED:		49. ITEMS AMENDED:	

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This is to certify that this is a true and correct reproduction or abstract of the official record filed in this office.

043-1122311

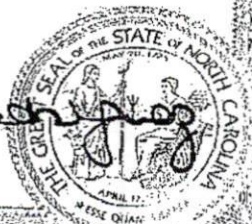
Matthew S. Willis
 Register of Deeds
 Harnett County

Witness my hand and official seal
 this the 4 day of Feb. 20 21

By: Victoria G. Roach
 Deputy Assistant Register of Deeds

DHHS 3914 (REVISED 8/15) NC VITAL RECORDS

Any alteration or erasure voids this certificate. Do not accept unless on security paper with Register of Deeds seal clearly embossed in left corner.



CERTIFICATION OF VITAL RECORD

JOHNSTON COUNTY OFFICE OF REGISTER OF DEEDS

NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES N.C. VITAL RECORDS

470

REGISTRATION DISTRICT NO. 061-161 LOCAL NO. COUNTY OF DEATH Johnston STATE FILE NO. TYPE OF DEATH Robert Anthony Tutor Jr. DATE OF DEATH August 4, 2016

Robert Anthony Tutor, Jr.

EMERALD EXAMINATION UNIT

MEDICAL EXAMINER ONLY

142 470

Volume Page This is to certify that this is a true and correct reproduction or abstract of the official record filed in this office.

023-218014

Witness my hand and official seal

this the 11th day of August, 2016

DEHS 3914 (REVISED 8/15) NC VITAL RECORDS

Any alteration or erasure voids this certificate. Do not accept unless on security paper with Register of Deeds seal clearly embossed in left corner.

Craig Olive Register of Deeds Johnston County

Amy S. Ziemerink

Assistant Register of Deeds



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

COPY

Prepared by:
Senter, Stephenson, Johnson, PA
114 Raleigh Street
Fuquay Varina, NC 27526

STATE OF NORTH CAROLINA

COUNTY OF HARNETT

**WILL OF
ROBERT ANTHONY TUTOR**

I, ROBERT ANTHONY TUTOR, of Harnett County, North Carolina, declare this to be my will and revoke all earlier wills and codicils.

**ARTICLE I
DISPOSITION OF ESTATE**

A. Gift of Tangible Personal Property. All my tangible personal property that was not held by me solely for investment purposes, including, but not limited to, my automobiles, household furniture and furnishings, clothing, jewelry, collectibles and personal effects, shall be disposed of as follows:

1. I give all such tangible personal property to my son, ROBERT ANTHONY TUTOR, JR., if he survives me.
2. If I am not survived by my son, I give all such tangible personal property his issue who survive me, per stirpes.
3. If I am not survived by my son nor his issue, I give all such tangible personal property to my sister, RHONDA T. THOMASON.
4. I may leave a writing which, although not a part of my will, expresses my desires concerning the disposition of my tangible personal property. I request, but do not require, that my wishes as set forth in any such writing be observed.
5. The costs of safeguarding, insuring, packing, storing and delivering my tangible personal property to any beneficiary under this Paragraph shall be paid as expenses of administration.

B. Gift of Real Property. I give a life estate subject to a condition subsequent in my house and lot located at and known as 734 Oak Ridge Duncan Ridge, Fuquay-Varina, North Carolina to my son, ROBERT ANTHONY TUTOR, JR., if he survives me and is residing in the home. Upon his death or when he no longer desires to live in the home, I give the house and lot to his issue then living, per stirpes. If he has no issue then living, I give the house and lot to my sister, RHONDA TUTOR THOMASON, per stirpes.

C. Gift of Residuary Estate. I give my residuary estate, being all my real and personal property, wherever located, not otherwise effectively disposed of, but without exercising any power of appointment over property which I may have, as follows:

1. I give my residuary estate to my Executor to be distributed to my son, ROBERT ANTHONY TUTOR, JR., if he survives me.

2. If I am not survived by my son, I give my residuary estate to my Executor to be distributed to his issue who survive me, per stirpes.

3. If I am not survived by my son nor his issue, I give my residuary estate to my Executor to be distributed to my sister, RHONDA TUTOR THOMASON, per stirpes.

ARTICLE II TRUST FOR BENEFICIARY UNDER AGE TWENTY-FIVE

If a share of my residuary estate is given outright to a beneficiary who has not reached the age of twenty-five (25) at the time of my death, such share shall not be distributed to the beneficiary but, instead, I give such share to the Trustee named below to be held in trust for the benefit of the beneficiary, together with any other property payable to the Trustee as a result of my death for the benefit of the beneficiary, and disposed of as follows:

A. Distribution Until Beneficiary Reaches Age Twenty-Five or Dies. Until the beneficiary reaches the age of twenty-five (25) or sooner dies,

1. The Trustee may distribute all or any portion of the trust property to the beneficiary in such amounts and at such times as the Trustee, in the Trustee's discretion, may determine. Any undistributed income may be added to the principal of the trust from time to time as the Trustee, in the Trustee's discretion, may determine.

2. As a guide to the Trustee and without limiting the Trustee's discretion, it is my desire that such discretion be exercised for such purposes as the Trustee shall deem reasonable and appropriate for the welfare, enjoyment and education of the beneficiary. The Trustee may take into consideration other financial resources of the beneficiary but is not required to do so.

B. Distribution When Beneficiary Reaches Age Twenty-Five or Dies. When the beneficiary reaches the age of twenty-five (25), the Trustee shall distribute the then remaining trust property to the beneficiary. If the beneficiary dies before reaching such age, then upon the death of the beneficiary, the Trustee shall distribute the then remaining trust property to the estate of the beneficiary.

ARTICLE III PAYMENT OF DEBTS, EXPENSES AND DEATH TAXES

A. Payment of Debts and Expenses. All my debts, health care expenses, funeral and burial expenses and the administration expenses of my estate shall be paid out of my residuary estate. I authorize my Executor, in my Executor's discretion, to spend more than is otherwise allowed by law for a suitable gravestone and for perpetual care of the lot upon which my grave is located.

B. Payment of Death Taxes. All death taxes (other than death taxes which are paid from property passing outside of this will pursuant to the terms of the governing instrument) shall be paid out of my residuary estate as an administration expense and shall not be charged against or recovered from any recipient or beneficiary of the property taxed, except that my Executor shall recover as provided by law any death tax attributable to property (i) over which I have a power of appointment, (ii) in which I have a qualifying income interest for life or (iii) in which I have a retained interest for life to the extent that any death tax recoverable by law is not otherwise paid out of such property.

ARTICLE IV THE FIDUCIARIES

A. Appointment of Executor. I appoint my sister, RHONDA TUTOR THOMASON, to be my Executor. If she fails or ceases to act for any reason, I appoint my niece, MICHELLE THOMASON CAPPS, to be my Executor. If it becomes necessary for a representative of my estate to qualify in any jurisdiction other than the State of North Carolina in which my Executor shall be unable or unwilling to qualify as Executor, then my Executor shall have the right to appoint an individual or corporate representative of my estate in such jurisdiction.

B. Appointment of Trustee. I appoint my sister, RHONDA TUTOR THOMASON, to be Trustee of any trust established under this will. If she fails or ceases to act for any reason, I appoint my niece, MICHELLE THOMASON CAPPS, to be Trustee. The Trustee shall have the right to resign without court order at any time in a writing signed by the Trustee, such resignation to be effective upon the acceptance of the trusteeship by a successor Trustee. The Trustee shall also have the right to appoint without court order a successor individual or corporate Trustee in a writing signed by the Trustee which states the event or events upon which the successor

Trustee shall act, except that a successor appointed by RHONDA TUTOR THOMASON shall act only when MICHELLE THOMASON CAPPS fails to do so.

C. Waiver of Bond and Court Supervision. No bond or other security shall be required from my Executor unless otherwise required by law. The Trustee shall not be required to give bond or other security notwithstanding the authority of the court to require bond. Any fiduciary may act without qualifying before any court or filing with any court any inventory, accounting or other report relating to the administration of my estate or any trust unless otherwise required by law to do so.

D. Compensation of Fiduciary. A corporate fiduciary may receive compensation for its services in accordance with its regularly adopted schedule of compensation in effect at the time the services under this will are performed. An individual Executor may receive reasonable compensation for such Executor's services. An individual Trustee may receive that compensation for such Trustee's services which is provided by law at the time the services under this will are performed.

ARTICLE V ADMINISTRATIVE POWERS OF FIDUCIARIES

It is my intention that in addition to all other powers conferred by law or elsewhere in this will, (i) my Executor shall have all the powers and authority conferred upon personal representatives by Article 13 of Chapter 28A of the General Statutes of North Carolina and (ii) the Trustee shall have all the powers and authority conferred upon the Trustee by the North Carolina Uniform Trust Code, Chapter 36C of the General Statutes of North Carolina, including, without limitation, the authority to invest subject to the prudent investor rule. To the extent they may not be conferred by law, I grant to my Executor and the Trustee the discretionary powers set forth below to be exercised without court order for any purpose that my Executor or the Trustee may deem advisable.

A. Powers Incorporated by Reference. With respect to my Executor, subject to Section 32-26 of the General Statutes of North Carolina, all of the powers set forth in Section 32-27 of the General Statutes of North Carolina as they exist at the time that I sign this will, and such powers are incorporated by reference with the same effect as though set out verbatim in it.

B. Possession and Disposition of Real Property. With respect to my Executor, the power to take possession, custody and control of real property owned by me at the time of my death, even though title to such real property is not devised to my Executor, and to sell, exchange, give options upon, partition, lease, mortgage or otherwise dispose of any such real property.

C. Distributions to or for the Benefit of a Beneficiary. Whenever authorized or directed to distribute property to a beneficiary, whether or not under a legal disability, the power to

distribute such property, unless otherwise directed, (i) directly to such beneficiary, including the transfer of property into such beneficiary's name by depositing cash or registering securities in his or her name, (ii) to a custodian or custodial trustee for such beneficiary under a uniform gifts or transfers to minors act or uniform custodial trust act, including a custodian or custodial trustee designated by the fiduciary, which may be the fiduciary, (iii) to the guardian or conservator of such beneficiary's estate, or (iv) to any other person, firm or institution for the benefit of such beneficiary, and the receipt of any of the foregoing shall constitute a full acquittance of the fiduciary to the extent of the distribution so made.

D. Retention and Acquisition of Bank Securities. The power (i) to retain for any period or periods of time securities which are securities of any corporate fiduciary acting under this will or of any corporation owning stock of the corporate fiduciary or of any subsidiary or affiliate of or successor to such corporation, and (ii) to acquire such securities by purchase, exchange or otherwise.

ARTICLE VI PRESUMPTION OF SURVIVORSHIP

For purposes of this will, (i) if any beneficiary under this will and I should die under such circumstances that there is uncertainty as to which person predeceased the other, it shall be conclusively presumed that such beneficiary predeceased me and (ii) if any issue of mine should die within a period of ninety (90) days after the date of my death, it shall be conclusively presumed that such issue predeceased me.

ARTICLE VII DEFINITIONS

For purposes of this will,

A. "Executor," "Trustee" and "Fiduciary." The term "Executor" or "Executors" includes any personal representative or representatives of my estate acting under this will such as a successor Executor or Executors and any Administrator with the will annexed. It also includes the term "Executrix" whenever the context requires it. The term "Trustee" or "Trustees" includes any Trustee or Trustees acting under a trust to which property passes pursuant to this will, and the term "fiduciary" or "fiduciaries" includes both an Executor and a Trustee.

B. "Death Taxes." The term "death taxes" means inheritance, estate, transfer and succession taxes, and any interest and penalties on these taxes, imposed by reason of my death by any jurisdiction with respect to property passing under or outside of the provisions of this will or any codicil to it which is includible in my estate for the purpose of determining such tax, including, but not limited to, any tax on property includible under section 2036 (relating to transfers with retained

life estate), section 2041 (relating to powers of appointment), section 2042 (relating to life insurance proceeds) or section 2044 (relating to qualified terminable interest property) of the Internal Revenue Code of 1986, as amended, or any comparable provision of state law, but excluding, however, any tax imposed by section 2032A(c) (relating to qualified real property), or chapter 13 (relating to generation-skipping transfers) of the Code, or any comparable provision of state law.

C. "Child," "Children" and "Issue." The terms "child" and "children" mean lawful lineal blood descendants in the first degree of the parent designated, and the term "issue" means lawful lineal blood descendants in any degree of the ancestor designated, but such terms shall include any person legally adopted prior to the time that person reaches the age of eighteen (18) and the lawful lineal descendants of any such person, whether of the blood or by adoption prior to such age.

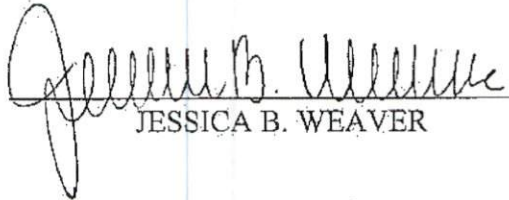
D. "Per Stirpes." Whenever a distribution is to be made to, or a division into shares is to be made for, a designated ancestor's issue who are living at a designated time, and such distribution or division is to be made "per stirpes," such distribution or division shall be made by first determining the generation nearest to such ancestor which has a person who represents that generation and who is living at the designated time. The property to be distributed or divided shall be divided into as many equal shares as may be necessary to allocate one share to each then living person of that generation and one share to each deceased person of that generation who left issue who are then living. Each living person of that generation who has not effectively disclaimed his or her share for federal tax purposes shall receive one share, and the share of each deceased person of that generation and of each living person of that generation who has effectively disclaimed his or her share shall be divided among his or her then living issue in the same manner.

E. "Trust Property." Unless the context indicates otherwise, references to "trust property" mean the net undistributed income and principal of the trust.

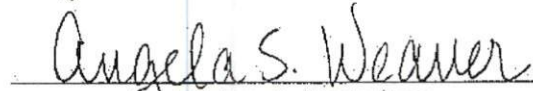
I, ROBERT ANTHONY TUTOR, the testator, sign my name to this instrument this 28th day of September, 2012, and being first duly sworn, do hereby declare to the undersigned authority that I sign and execute this instrument as my last will and that I sign it willingly (or willingly direct another to sign it for me), that I execute it as my free and voluntary act for the purposes therein expressed, and that I am eighteen years of age or older, of sound mind, and under no constraint or undue influence.


ROBERT ANTHONY TUTOR

We, JESSICA B. WEAVER and ANGELA S. WEAVER, the witnesses, sign our names to this instrument, being first duly sworn, and do hereby declare to the undersigned authority that the testator signs and executes this instrument as his last will in our presence and that he signs it willingly (or willingly directs another to sign it for him), and that each of us, at the request of the testator, and in the presence and hearing of the testator, and in the presence and hearing of each other, hereby signs this last will as witness to the testator's signing, and to the best of our knowledge the testator is eighteen years of age or older, of sound mind, and under no constraint or undue influence.


JESSICA B. WEAVER

Angier, NC
(Residence)


ANGELA S. WEAVER

Angier, NC
(Residence)

STATE OF NORTH CAROLINA

CERTIFICATE FOR SELF-PROVING WILL

COUNTY OF HARNETT

Before me the undersigned authority, on this day personally appeared ROBERT ANTHONY TUTOR, JESSICA B. WEAVER and ANGELA S. WEAVER, known to me to be the Testator and the witnesses, respectively, whose names are signed to the attached first duly sworn. The Testator declared to me and to the witnesses in my presence: that said instrument is his Last Will and Testament; that he had willingly signed, or directed another to sign the same for him, and executed it in the presence of the witnesses as his free and voluntary act for purposes therein expressed; or, that the Testator signified that the instrument was his instrument by acknowledging to them his signature previously affixed thereto.

The witnesses stated before that the foregoing Will was executed and acknowledged by the Testator as his Last Will and Testament in the presence of the witnesses who, in his presence at his request, and in the presence of each other, subscribed their names thereto as attesting witnesses, and that the Testator, at the time of the execution of the Will, was over the age of eighteen (18) years and of sound mind and disposing mind and memory.

Robert Anthony Tutor
ROBERT ANTHONY TUTOR

Jessica B. Weaver
JESSICA B. WEAVER

Angela S. Weaver
ANGELA S. WEAVER

STATE OF NORTH CAROLINA
COUNTY OF WAKE

Subscribed, sworn and acknowledged before me by ROBERT ANTHONY TUTOR, the Testator, subscribed and sworn before me by Jessica B. Weaver and Angela S. Weaver, the witnesses, this the 28th day of September, A.D., 2012.

Signed Elizabeth A. Zager
Elizabeth A. Zager, Notary Public

My Commission Expires: 09/15/2016



COPY

Prepared by: Senter, Stephenson & Johnson, PA
Mail to: P.O. Box 446, Fuquay-Varina, NC 27526

STATE OF NORTH CAROLINA

GENERAL POWER OF ATTORNEY

COUNTY OF HARNETT

**ARTICLE I
DESIGNATION OF AGENT**

A. Designation of Agent. I, **ROBERT ANTHONY TUTOR**, of Harnett County, North Carolina, being of sound mind, appoint, **RHONDA TUTOR THOMASON**, as my Attorney-in-Fact (herein referred to as my "Agent") for the purposes set out below.

B. Designation of Successor Agents. If the person named as my Agent is not reasonably available or is unable or unwilling for any reason to act as my Agent, then I appoint, **ROBERT ANTHONY TUTOR, JR.**, to serve in that capacity. The successor Agent designated shall be vested with the same power and duties as if originally named as my Agent.

**ARTICLE II
GENERAL STATEMENT OF
AUTHORITY GRANTED**

I grant to my Agent the power to do and perform in a fiduciary capacity as my Agent may deem advisable anything of any character which I might do or perform for myself if personally present and acting, including, but not limited to, the specific powers set forth below in Articles III, IV, and V, but excluding those matters which my Agent is not permitted to do as expressly provided in this General Power of Attorney or as provided by law.

ARTICLE III
SPECIFIC POWERS RELATING TO PROPERTY

My Agent may exercise the following powers relating to property or interests in property which I now own or may hereafter acquire:

A. Collection of Property. The power to demand, sue for or use other lawful means to obtain, collect, and take possession and control of any sums of money, debts, checks, accounts, interest, dividends, annuities, rents, goods, chattels, inheritances, insurance benefits, social security benefits, unemployment benefits, veteran's benefits and any other claims and rights whatsoever which are now or may hereafter become due, owing, payable or belonging to me, and to compromise, settle, arbitrate, abandon or otherwise deal with any such claims;

B. Sale or Other Disposition of Property. The power to sell, exchange, quitclaim, convert, partition, grant an option on, abandon or otherwise dispose of all or any part of my real or personal property or my interest in such property, including, but not limited to, automobiles, stocks, bonds, and real estate owned by me individually, as a tenant in common, tenant by the entirety or otherwise, upon any terms and conditions;

C. Acquisition and Retention of Investments. The power to acquire and retain for any period of time as investments, without diversification as to kind or amount, any real or personal property, or interest in such property, including an undivided, temporary or remainder interest, income or non-income producing, located within or outside the United States, and including, but not limited to, notes, bonds, debentures, mortgages and other obligations, secured or unsecured, common and preferred stocks, mutual funds (including mutual funds administered or advised by any corporate Agent acting under this General Power of Attorney or affiliate of such corporation), legal and discretionary trust funds, general and limited partnership interests, membership interests in limited liability companies, leases and securities of any corporate Agent or any corporation owning stock of the corporate Agent or of any subsidiary or affiliate of or successor to such corporation;

D. Management of Property. The power to take possession, custody, control and otherwise manage any of my real or personal property, or my interest in such property, including, but not limited to, the power (i) to protect, develop, subdivide and consolidate such property, (ii) to lease such property upon any terms and conditions including options to renew or purchase and for any period or periods of time and to modify, renew or extend any existing leases, (iii) to erect, repair, or make improvements to any building or other property and to remove existing structures, (iv) to establish and maintain reserves for the maintenance, protection and improvement of such property and for other purposes, (v) to initiate or continue farming, mining or timber operations on such property, (vi) to purchase and carry casualty and liability insurance, (vii) to grant or release easements with respect to such property, (viii) to dedicate or withdraw from dedication such property from public use, and (ix) to join with co-owners in exercising any such powers;

E. Business Interests. The power to continue to own, or to form initially, and operate any business interest, whether in the form of a proprietorship, corporation, general or limited partnership, limited liability company, joint venture or other organization, including, but not limited to, the power (i) to effect incorporation, dissolution or other change in the form of the organization of such business interest, (ii) to dispose of any part of such business interest or acquire the interest of others, (iii) to continue, enter into, modify or terminate any agreements relating to any such business interest, and (iv) to invest capital or additional capital in or lend money to such business interest;

F. Borrowing Money. The power (i) to borrow money for my benefit from my Agent, individually, or from others, upon any terms and conditions, (ii) to secure the payment of any amount so borrowed by mortgaging, pledging or otherwise encumbering any of my real or personal property, or my interest in such property, and (iii) to modify, renew or extend the time for payment of any obligation, secured or unsecured, payable by me for any period or periods of time and upon any terms and conditions;

G. Lending Money. The power (i) to lend money to any person upon any terms and conditions, (ii) to modify, renew or extend the time for payment of any obligation, secured or unsecured, payable to me for any period or periods of time and upon any terms and conditions, and (iii) to foreclose as an incident to the collection of any obligation, any deed of trust or other lien securing such obligation, to bid on the property at such foreclosure sale or otherwise acquire the property without foreclosure and to retain the property so obtained;

H. Holding Property in Nominee Form. The power to register and hold any securities or other property in the name of a nominee or in any other form without disclosure of the agency relationship, or to hold the same in such form that they will pass by delivery;

I. Exercise of Security Rights. With regard to securities of mine, including stocks, bonds and any evidence of indebtedness, the power (i) to vote any such securities in person or by special, limited or general proxy at any shareholders' meeting, (ii) to consent to or participate in any contract, lease, mortgage, foreclosure, voting trust, purchase, sale or other action by any corporation, company or association, (iii) to consent to or participate in, facilitate and implement any plan of incorporation, reincorporation, reorganization, consolidation, merger, liquidation, readjustment or other similar plan with respect to any such corporation, company or association, and (iv) to exercise all options, rights and privileges, including the exercise or sale of conversion, subscription or other rights of whatever nature pertaining to any such securities and to subscribe for additional securities or other property;

J. Dealings With Revocable Trusts. The power to exercise my powers as grantor of a revocable trust with respect to (i) the revocation and amendment of the revocable trust, (ii) the addition to the revocable trust of all or any part of my real or personal property or my interest in such property, and (iii) the disposition of the property of the revocable trust, and the power to create a revocable trust with me as grantor, except that the exercise of the powers granted in this Paragraph

J may not alter the designation of beneficiaries to receive property on my death under my existing estate plan;

K. Gifts. If, in the opinion of my Agent, my remaining property is more than sufficient to provide for the continued support and medical care of my spouse, my dependents and me in accordance with our customary standard of living, the power to make periodic gifts of my real and personal property or my interest in such property to or for the benefit of any one or more of my issue and the spouses of my issue (including my Agent), as follows:

1. Gifts may be made (i) that qualify for and do not exceed the annual exclusion for federal gift tax purposes, with or without spousal gift-splitting, and (ii) that qualify for the exclusion for tuition or medical care for federal gift tax purposes;

2. Such gifts may be made in any manner that will qualify for the exclusion, including, but not limited to, outright gifts, gifts in trust, gifts to a custodian under a uniform gifts or transfers to minors act, and gifts to qualified state tuition plans as described in section 529 of the Internal Revenue Code;

3. Notwithstanding the foregoing, the aggregate amount of gifts in any calendar year to or for the benefit of an Agent or to satisfy an Agent's legal obligations shall not exceed the greater of (i) five percent (5%) of the value of the assets over which my Agent has the power to act or (ii) five thousand dollars (\$5,000.00);

L. Renunciations. The power to renounce or disclaim in whole or in part the right of succession to any real or personal property or interest in such property passing to me as an heir or beneficiary under a will or otherwise when in the opinion of my Agent a renunciation or disclaimer is advisable for tax purposes;

M. Insurance. The power to exercise any right with regard to any life, disability or other insurance contract or annuity contract owned by me or acquired by my Agent on my behalf, including, but not limited to, the right (i) to change coverage of any such contract, (ii) to borrow upon any such contract, (iii) to select options with respect to any such contract, and (iv) to make or change the beneficiary designation of any such contract, except that my Agent cannot be designated as beneficiary unless my Agent is my spouse or a child or grandchild of mine;

N. Retirement Plans. The power to exercise any right with regard to any retirement plan I may have or entered into by my Agent on my behalf, including, but not limited to, the power (i) to create and contribute to an individual retirement account, an employee benefit plan, or other retirement plan, (ii) to "roll over" plan benefits, (iii) to borrow money from any such plan, (iv) to select options with respect to any such plan, and (v) to make or change the beneficiary designation of any such plan, except that my Agent cannot be designated beneficiary unless my Agent is my spouse or a child or grandchild of mine; and

O. Custodial Trusts. The power to direct the administration or distribution of or to terminate any custodial trust established for my benefit under a uniform custodial trust act; and the power to determine whether I am incapacitated or whether my incapacity has ceased for the purposes of any such custodial trust.

ARTICLE IV SPECIFIC POWERS RELATING TO PERSONAL AFFAIRS

My Agent may exercise the following powers relating to personal affairs:

A. Support. The power to do any acts, including the disbursing of any moneys belonging to me, which, in the opinion of my Agent, may be necessary or proper for any purpose in connection with the support and maintenance of my spouse, my dependents and me in accordance with our customary standard of living, including, but not limited to, provisions for housing, clothing, food, transportation, recreation, education and the employing of any person whose services may be needed for such purposes;

B. Health Care. The power to disburse any moneys belonging to me, which, in the opinion of my Agent, may be necessary or proper for any purpose in connection with my health care and the health care of my spouse and dependents, that is, any care, treatment, service or procedure to maintain, diagnose, treat, or provide for my physical or mental health or personal care and comfort and that of my spouse and dependents, including, but not limited to, the power to pay for the charges of health care providers, such as any physician, dentist, or podiatrist and any hospital, nursing or convalescent home, or other institution; and

C. Other Personal Affairs. The power to do any acts, including the disbursing of any moneys belonging to me, which, in the opinion of my Agent, may be necessary or proper in connection with the conduct of my other personal affairs, including, but not limited to, (i) continuation, use or termination of any charge or credit accounts, (ii) payments or contributions to any charitable, religious or educational organizations, (iii) dealing with my mail and representing me in any matter concerning the U.S. Postal Service, (iv) continuation or discontinuation of my membership in any club or other organization, and (v) acceptance of or resignation from, on my behalf, any offices or positions which I may hold including any fiduciary positions and appointment of, on my behalf, any fiduciaries which I may have the right to appoint.

ARTICLE V MISCELLANEOUS SPECIFIC POWERS

My Agent may exercise the following miscellaneous powers:

A. Tax Matters. The power to perform any and all acts that I might perform with respect to any and all federal, state, local and foreign taxes, for prior tax years as well as for tax years ending subsequent to the date of this General Power of Attorney, including, but not limited to, the power (i) to make, execute and file returns, amended returns, powers of attorney, and declarations of estimated tax, joint or otherwise, (ii) to represent me before any office of the Internal Revenue Service or other taxing authority with respect to any audit or other tax matter involving any tax year or period, (iii) to receive confidential information, (iv) to receive, endorse, and collect checks refunding taxes, penalties or interest, (v) to execute waivers of restrictions on assessment or collection of deficiencies in tax, (vi) to execute consents extending the statutory period for assessment or collection of taxes, (vii) to execute and prosecute protests or claims for refund or applications for correction of assessed value, (viii) to execute closing agreements, (ix) to prosecute, defend, compromise or settle any tax matter, and (x) to delegate authority to or substitute another Agent or attorney respecting any such taxes or tax matters;

B. Banking Transactions. The power (i) to make deposits in or withdrawals from any account of mine in any banking, trust or investment institution, whether such account is in my name or in the joint names of myself and any other person, (ii) to open any account or interest with any such institution in my name or in the name of my Agent or in our names jointly, (iii) to endorse any checks or negotiable instruments payable to me for collection or deposit to such accounts and to sign, execute and deliver checks or drafts on such accounts, and (iv) to exercise any right, option or privilege pertaining to any account, deposit, certificate of deposit, or other interest with any such institution;

C. Safe Deposits. The power (i) to have access to any safe deposit box held in my name or in the joint names of myself and any other person, (ii) to lease one or more safe deposit boxes for safekeeping of my assets, and (iii) to deal with the contents of any safe deposit box, including the removal of such contents;

D. Legal and Other Actions. The power to cause to be commenced, prosecuted, defended, appealed, compromised, settled, arbitrated or discontinued in my name as plaintiff or defendant, as the case may be, any legal or equitable proceedings, judicial or administrative; and

E. Employment of Advisors. The power to employ persons, firms and corporations to advise or assist my Agent, including, but not limited to, agents, accountants, auditors, brokers, attorneys-at-law, custodians, investment counsel, rental agents, realtors, appraisers and tax specialists.

**ARTICLE VI
LIMITATIONS ON EXERCISE
OF POWERS BY AGENT**

Notwithstanding the grant of powers in this General Power of Attorney, my Agent shall have no power (i) to deal with insurance policies I may own on the life of an Agent, or (ii)

except as specifically authorized by this General Power of Attorney, to cause assets to pass to my Agent or in discharge of the legal obligations of my Agent, whether by inter vivos transfer, designation of beneficiary of any contract or in any other manner.

**ARTICLE VII
EFFECT OF SUBSEQUENT
DISABILITY OF PRINCIPAL**

This General Power of Attorney is executed pursuant to Article 2 of Chapter 32A of the General Statutes of North Carolina and shall not be affected by my subsequent incapacity or mental incompetence.

**ARTICLE VIII
ADMINISTRATIVE AND OTHER
MISCELLANEOUS PROVISIONS**

A. Guardianship Provision. If it becomes necessary for a court to appoint a guardian of my estate, I nominate my Agent acting under this document to be the guardian of my estate, to serve without bond or security.

B. Reliance of Third Parties on Agent.

1. No person who relies in good faith upon the authority of or any representations by my Agent shall be liable to me, my estate, my heirs, successors, assigns, or personal representatives, for actions or omissions by my Agent.

2. The powers conferred on my Agent by this document may be exercised by my Agent alone, and my Agent's signature or acts under the authority granted in this document may be accepted by persons as fully authorized by me and with the same force and effect as if I were personally present, competent, and acting on my own behalf. All acts performed in good faith by my Agent pursuant to this General Power of Attorney are done with my consent and shall have the same validity and effect as if I were present and exercised the powers myself, and shall inure to the benefit of and bind me, my estate, my heirs, successors, assigns, and personal representatives. The authority of my Agent pursuant to this General Power of Attorney shall be superior to and binding upon my family, relatives, friends, and others.

C. Revocation of General Power of Attorney. If this General Power of Attorney has not been registered in an office of the register of deeds in any county in North Carolina, then in addition to the methods of revocation provided by Section 32A-13(b) of the General Statutes of North Carolina, this General Power of Attorney may be revoked by my executing and acknowledging, in the manner provided for execution of durable powers of attorney in Article 2 of Chapter 32A of the General Statutes of North Carolina a subsequent General Power of Attorney, a

copy of which is delivered to the Agent acting under this General Power of Attorney in person or to such person's last known address by certified or registered mail, return receipt requested.

D. Legal Documents and Incidental Costs. My Agent shall be entitled to sign, execute, deliver, and acknowledge any contract or other document that may be necessary, desirable, convenient, or proper in order to exercise and carry out any of the powers described in this document and to incur reasonable costs on my behalf incident to the exercise of these powers.

E. Duty and Limited Liability of Agent. This General Power of Attorney does not impose a duty on my Agent to exercise granted powers, but when a power is exercised, my Agent shall use due care to act in my best interests and in accordance with this document. My Agent and my Agent's estate, heirs, successors, and assigns are hereby released and forever discharged by me, my estate, my heirs, successors, and assigns and personal representatives from all liability and from all claims or demands of all kinds arising out of the acts or omissions of my Agent pursuant to this document, except for willful misconduct or gross negligence.

F. Accountings. My Agent shall keep full and accurate inventories and accounts of all transactions for me as my Agent. Such inventories and accounts shall be made available for inspection upon request by me or by my guardian or personal representative. My Agent shall not be required to file any inventory or accounts with any court or clerk.

G. Removal and Resignation of Agent. I shall have the right to remove an Agent at any time in a writing signed by me and acknowledged before a notary public and delivered to the Agent in person or to such person's last known address by certified or registered mail, return receipt requested. An Agent shall have the right to resign in a writing signed by the Agent and acknowledged before a notary public and delivered to me and to any other Agent acting under this General Power of Attorney or, if none, to the designated successor Agent, if any, in person or to such person's last known address by certified or registered mail, return receipt requested.

H. Relation of Agent to Health Care Agent. Any decision affecting my property or financial affairs, including a decision as to the disbursement of moneys belonging to me, which is made by my Health Care Agent appointed pursuant to a Health Care Power of Attorney meeting the requirements of Article 3 of Chapter 32A of the General Statutes of North Carolina shall be superior to and binding upon my Agent acting under this General Power of Attorney, and my Agent acting under this General Power of Attorney shall not be required to inquire into whether any such decision is necessary to exercise powers relating to health care, or whether costs incurred by my Health Care Agent are reasonable, and shall not be liable to me, my estate, my heirs, successors, assigns and personal representatives for any acts or omissions arising from any such decision.

I. Partial Invalidity. If any part of this General Power of Attorney is declared invalid or unenforceable under applicable law, such decision shall not affect the validity of the remaining parts.

2012.

I have signed and sealed this General Power of Attorney this 28th day of September,

Robert Anthony Tutor (SEAL)
ROBERT ANTHONY TUTOR

STATE OF NORTH CAROLINA

COUNTY OF WAKE

On this 28th day of September, 2012 personally appeared before me, the said named **ROBERT ANTHONY TUTOR**, to me known and known to me to be the person described in and who executed the foregoing instrument and he acknowledged that he executed the same, and being duly sworn by me, made oath that the statements in the foregoing instrument are true.



Elizabeth A. Zager
Elizabeth A. Zager, notary public
My commission expires: 09/15/2016