STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT FORM UCC-1 ALA.

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM
Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	*****	This FINANCING STA			ling Office	er for
Return copy or recorded original to:			ACE FOR USE OF FIL me, Number & Filing O	ING OFFICER			<u> </u>
Bank of Alabama 2340 Woodcrest Place Birmingham Alabama 35209 Attn: Vella Scott							
Pre-paid Acct. #	(Last Name First if a Person)						
Frank L. Sledge 160 Indigo Lane Calera Alabama 35040						995-28928	SERTIFIED JUNGE OF PROBATE 27.00
Social Security / Tax ID #	(Last Name First if a Person)					Inst + 1	10/11/19 01:42 PM SHELRY COUNTY OUL SNA
Social Security/Tax ID #	-	FILED V	VITH:	-		<u> </u>	
☐ Additional debtors on attached UCC-E		sh	elby Count	У			
3 SECURED PARTY) (Last Name First if a Person) Bank of Alabama 2340 Woodcrest Place Birmingham Alabama 35209 Social Security/Tax ID #		4. ASSI	GNEE OF SECURED F	PARTY	(IF ANY)	(l	ast Name First if a Person)
Additional secured parties on attached UCC-E 5. The Financing Statement Covers the Following Types (or it 1990 Fleetwood Prowler LYN)		ler s	erial # lE	C 1 L292	1L28564	23	
						8 6 0 8	nter Code(s) From ack of Form That est Describes The foliateral Covered by This Filing: 600
Check X if covered: Products of Collateral are also con	vered.					_	
 6. This statement is filed without the debtor's signature to perfected X, if so) already subject to a security interest in another jurisdiction already subject to a security interest in another jurisdiction to this state. which is proceeds of the original collateral described above perfected. 	when it was brought into this state. when debtor's location changed e in which a security interest is	Morto 8. 🗆 Ti		ured by this f \$100.00 or fra covers timbe ortgage reco	financing statem action thereof) \$ er to be cut, crosted rds (Describe re	ps, or fixtual estate a	8,000.00 00 + 15.00 res and is to be cross and if debtor does not have
☐ acquired after a change of name, identity or corporate stru☐ as to which the filing has lapsed ☐ ☐	cture of debtor		(Required on	Signature(s) ly if filed with	of Secured Par our debtor's Sig	rty(ies) mature —	see Box 6)
Signature(s) of Debloc(s) Frank L. Slee	ge		Signatule(s) of Secur Dena Sarr	ed Party(ies)	or Assignee	u	
Signature(s) of Debtor(s)			Signature(s) of Secur		or Assignee		
Type Name of Individual or Business (1) FILING OFFICER COPY — ALPHABETICAL (3) FILING OFFI	CER COPY ACKNOWLEDGEMENT		Type Name of Individ	ual or Busine		PM COMM	IERCIAL CODE FORM UCC-