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This Financing Statement is presented for filing pursuant to the Uniform Commercial Code and will remain effective, with certain exceptions, for 5 years from date of filing.

A. NAME & TEL. # OF CONTACT AT FILER (optional)		B. FILING OFFICE ACCT.# (optional)	
C. RETURN COPY TO: (Name and Mailing Address)			
<div style="border: 1px solid black; padding: 10px; margin: 10px;"> <p>Regions Bank</p> <p>910 North Main Street</p> <p>Montevallo, AL 35115</p> </div>			
D. OPTIONAL DESIGNATION (if applicable):			
<input type="checkbox"/> LESSOR/LESSEE	<input type="checkbox"/> CONSIGNOR/CONSIGNEE	<input type="checkbox"/> NON- UCC FILING	

Inst # 1998-28935

07/29/1998-28935
02:00 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
001 MCD 40-20

1a. ENTITY'S NAME										
1b. INDIVIDUAL'S LAST NAME EDWARDS				FIRST NAME JASON			MIDDLE NAME		SUFFIX	
1c. MAILING ADDRESS PO BOX 94				CITY WILTON			STATE AL	COUNTRY	POSTAL CODE 35187-0094	
1d. S.S. OR TAX I.D.# [REDACTED]		OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	1e. TYPE OF ENTITY		1f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION			1g. ENTITY'S ORGANIZATIONAL I.D.#, if any <input type="checkbox"/> NONE		

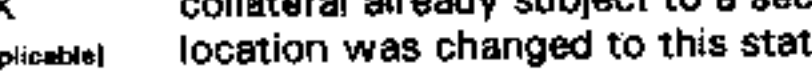
2a. ENTITY'S NAME							
OR	2b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX
2c. MAILING ADDRESS			CITY		STATE	COUNTRY	POSTAL CODE
2d. S.S. OR TAX I.D.#	OPTIONAL ADD'NL INFO RE ENTITY DEBTOR	2e. TYPE OF ENTITY	2f. ENTITY'S STATE OR COUNTRY OF ORGANIZATION			2g. ENTITY'S ORGANIZATIONAL I.D.#, if any	
						<input type="checkbox"/> NONE	

OR	3a. ENTITY'S NAME Regions Bank				
	3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS 910 North Main Street		CITY Montevallo	STATE AL	COUNTRY	POSTAL CODE 35115

TRAILER; whether any of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and accounts proceeds)..

This Financing Statement is to be recorded in the real estate records.

Indebt. 14,800.
tax 22.20

<p>5. CHECK <input type="checkbox"/> This FINANCING STATEMENT is signed by the Secured Party instead of the Debtor to perfect a security interest (a) in collateral already subject to a security interest in another jurisdiction when it was brought into this state, or when the debtor's location was changed to this state, or (b) in accordance with other statutory provisions [additional data may be required]</p>	<p>7. If filed in Florida (check one) <input type="checkbox"/> Documentary stamp tax paid <input checked="" type="checkbox"/> Documentary stamp tax not applicable</p>
<p>6. REQUIRED SIGNATURE(S) </p>	<p>8. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS [if applicable] Attach Addendum</p> <p>9. Check to REQUEST SEARCH CERTIFICATE(S) on Debtor(s) [ADDITIONAL FEE] (optional) <input type="checkbox"/> All Debtors <input type="checkbox"/> Debtor 1 <input type="checkbox"/> Debtor 2</p>

CFI ProServices, Inc. 400 S.W. 6th Avenue, Portland, Oregon 97204