STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

52855

Important: Read Instructions on Back Before Filling out Form.

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☐ The Debtor is a transmittin as defined in ALA CODE 7		No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to filing pursuant to the Uniform Commercial Co	a Filing Officer for de.	*
Return copy or recorded			THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		
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Pre-paid Acct	8(F/)	the aut Marca Circle if a Decease)	<u>-</u>	_	
2 Name and Address of Bo	ichael S	(Last Name First if a Person)		Ω G	CER See
P.O. Box	445	•		 	
Helena, /	AL 35080			Ņ	\ ₹ 🗟
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Social Security/Tax ID #				₹ U	0 80
2A. Name and Address of De		(Last Name First if a Person)		*	ı.
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Social Security/Tax (D #.	···/	<u>. </u>	FILED WITH:		
 Additional debtors on atta- NAME AND ADDRESS O 		Jame First if a Person)	4. NAME AND ADDRESS OF ASSIGNEE OF SECURED PART	Y (IFANY) (Las	t Name First if a Person)
			4. IRANG REPRESS OF ASSIGNED OF SECOND PAIN	· (ii-Air) (Las	
Southtrus	t Bank, NA	-			
P.O. Box					
DITHETISTE	m, AL 35210	•			
Social Sucurity/Tax ID #.					
Additional secured parties	s on attached UCC-E	•			
5. This statement refers	to original Financing Stateme	ent bearing File No. 29886	<u> </u>		
Filed with Judge	<u>e of Probate</u>	of Shelby County	Date Filed 11/31	— ¹⁹ -91	
- b /	-		Party, bearing file number shown above, is still effective. ent bearing the file number shown above.		
8. Partial or The Se	cured Party's right under the	financing statement bearing file number.	shown above to the		
Assignment whose	name and address appears in				
		nber shown above is amended as set for il described in item 11 from the financing			
Release number	r shown above.	<u> </u>			·
				11A. Enter C	ode(s) From
•				Back of Best De	Form That escribes The
				Collater By This	ral Covered Filing:
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	roducts of Collateral are also	covered.	. ^	,	
JIMON A II OUTGIGU. LA FI			1000 in month	11-1	· ·
Signature(s) of Debtor(s	<u>.</u> (s)		Signature(s) of Secured Party(ies)		-
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Signature(s) of Debtor(s) (necessary only if item 9 is	applicable)	Signature(s) of Secured Party(ies)		
Type Name of Individu	 		Southtmist Bank NA Type Name of Marketon Marketo	NEADLI OALESTOOIS	CODE FORMUSE A
1) FILING OFFICER COPY - ALPHA	ADC I ICAL (3) FILING OF	FFICER COPY - ACKNOWLEDGEMENT	STANDARD FORM — U	THE COMMITTEE PROJECT	. CODE — FORM UCC-3