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

60718 Important: Read Instructions on Back Before Filling out Form.

Republication Inc.

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a filling pursuant to the Uniform Commercial Code.	Filio <b>biOtti</b> cer for
Central State BAnk P.O. Box 180 Calera, Al. 35040		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct. #	(Last Name First if a Person)		CERTIFIED  WE WENTER
Social Security / Tax ID #	NY) (Last Name First if a Person)		10/02/2 10:20 AM MELY COUNT SELY COUNT 901 MB
Social Security/Tax ID #		FILED WITH:	± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ± ±
Gentral STate BAnk Highway 25 P.O. Box 180 Calera, Al. 35040  Social Security/Tax ID #		Shelby County Judge of Pro  4 NAME AND ADDRESS OF ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)
☐ Additional secured parties on attached UCC-E	······································		
5. This statement refers to original Financing State	tement bearing File No. 1995-0173	5	
<ul> <li>6.  Continuation. The original financing statement</li> <li>7.  Termination. Secured Party no longer claims</li> <li>8.  Partial or The Secured Party's right under property described in item 11 or Assignment. whose name and address appears</li> <li>9.  Amendment Financing statement bearing file</li> </ul>	the financing statement bearing file number sho to all of the property listed on this file, is assigned	t bearing the file number shown above.  Own above to the add to the assignee in item 11	<del>-1995</del>
Super A Farm-All Tracto	r with Disc, Plow and	Box Blade	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
Check X if covered: Products of Collateral are al	Iso covered.	<b>+</b>	 
Signature(s) of Debtor(s) (necessary)		Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item 9	is applicable)	Signature(s) of Secured Party(ies)	<del></del>
Type Name of Individual or Business ) FILING OFFICER COPY - ALPHARETICAL (2) FILING		Type Name of Individual of Bull Ank	<del></del>