NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

IMPORTANT - READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM - DO NOT DETACH STUB

		200403 Shelby 03/10/	10000123180 Pg 1/2 Cnty Judge of Prot 2004 11:28:00 FILE	.00 ate, AL D/CERTIFIED
UCC FINANCING STATEMENT AMENDMEN	VT			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY				
A. NAME & PHONE OF CONTACT AT FILER [optional]				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
LOAN EXPRESS INC P.O. BOX 1326 440 BROAD ST SELMA, AL 36702				
	THE ABOVE SE	PACE IS FOR	FILING OFFICE USE O	NLY
1a. INITIAL FINANCING STATEMENT FILE #			FINANCING STATEMENT A	
2001-43320		REA	filed [for record] (or recorded L ESTATE RECORDS.	
2. X TERMINATION: Effectiveness of the Financing Statement identified above is				
3. CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	with respect to security interest(s) of the Secured Pa	arty authorizing	this Continuation Statement is	S
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a	ddress of assignee in item 7c; and also give name o	of assignor in ite	m 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects De Also check one of the following three boxes and provide appropriate information in ite CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	give new DELETE name: Give record na	ame ┌─┐ Al	o boxes. OD name: Complete item 7a complete items 7d-	
6. CURRENT RECORD INFORMATION:				
6a. ORGANIZATION'S NAME				
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
RAY	B E T T T	T		
7. CHANGED (NEW) OR ADDED INFORMATION:		<u> </u>		
7a. ORGANIZATION'S NAME		·		
OR THE INDUSTRIAL IS LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
7b. INDIVIDUAL'S LAST NAME	FIRSTIVALVIC	IVIIDULE	VAIVIE	30111
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	Za. OBG/	ANIZATIONAL ID #, if any	
ORGANIZATION DEBTOR	71. domiobiomon or oriaxinaxinori	/ g. Or ic./	THE PRINCIPAL ID #, II ally	NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.				INONE
Describe collateral deleted or added, or give entire restated collater	ral description, or describe collateral assigne	ed.		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a. ORGANIZATION'S NAME				y a Debtor which
LOAN EXPRESS INC				
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	IAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA	•	• • • • • • • • • • • • • • • • • • •		•

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

Important: Read Instructions on Back Before Filling out Form.

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is possible filling pursuant to the Uniform Comm	resented to a Filing Officer for percial Code
1. Return copy or recorded original to:		THIS SPACE FOR USE OF FILING OFFICE Date, Time, Number & Filing Officer	
	•		20040310000123180 Pg 2/2 .00 Shelby Cnty Judge of Probate, AL
LOAN EXPRESS, INC P.O. BOX 205'54 HAZEL STREET CENTREVILLE, AL 35042-			03/10/2004 11:28:00 FILED/CERTIFI
CENTREVILLE, AL 35042			
•			
Pre-paid Acct. #	(Last Name First if a Person)		さら
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PAV RETTY N			
112 TOMLYN RD			Wind the second
MONTEVALLO, AL 35115-			
Social Security/Tax ID #	——————————————————————————————————————		
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		
	•	·	•
3	·		
. \$			
			•
Social Security/Tax ID #			
☐ Additional debtors on attached UCC-E		FILED WITH:	······································
3. Name and Address of Secured Party		4. Name and Address of Assignee of Secure	d Party (IF ANY)
LOAN EXPRESS, INC			
P.O. BOX 205 54 HAZEL	BTREET		
CENTREVILLE, AL 35042			
Social Security/Tax ID #			* **
Additional secured parties on attached UCC-E			
5. The Financing Statement Covers the Following T	voes (or items) of Property:	<u> </u>	
,			
ONE ORION TELEVISION MO	DEL #	•	
192988, DNE BLACK TRAIL SERIAL #AAAAAA5X18BJS:	OR		5A. Enter Code(s) From Back of Form That
MESH HIGH SIDES, ONE EL	HO CHAI		Best Describes The Collateral Covered
N SAW MODEL CS3000 SERI	EL PPT		By This Filling:
2400 SERIAL 519761 AND	ONE LAW	•	
N BOY LAWN MOWER MODEL SERIAL #200088304	#18324		
			·
, ;			
Check X if covered: Products of Collateral are	also covered.		· — — — — — — — — — — — — — — — — — — —
This statement is filed without the debtor's signature (check X, if so)	البرسانية مسخوات مطالكا وبخطال بمختلات مطاوح مخواها المتراجات والمستري والمتراجات والواحدة والواداة	7. Complete only when filing with the Judge of The initial indebtedness secured by this final	Probate: 30-1.45
already subject to a security interest in another judge already subject to a security interest in another judge.	_ ` ` ` · · · · · · · · · · · · · · · ·	Mortgage tax due (15¢ per \$100.00 or fraction	
to this state.	and the state of the	8. This financing statement covers timber to	be cut, crops, or fixtures and is tobe the indexed ed real estate and if debtor does not have an
which is proceeds of the original collateral desc perfected.	rided above in which a security interest is	interest of record, give name of record owner	r in Box 5)
 acquired after a change of name, identity or corporate as to which the filing has lapsed. 	rate structure of debtor.	Signature(s) of (Required only if filed without	l Secured Party(ies) It debtor's Signature see Box 6)
The same of the sa	· · · · · · · · · · · · · · · · · · ·		
Signature(s) of Deptor(s)		Signature(s) of Secured Party(ies)	or Assignee
<i></i>			
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	or Assignee
Type Name of Individual or Business		Type Name of Individual or Busines	<u> </u>