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Shelby Cnt	y Judge	of Proba	te,AL
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CC FINANCING STATE	MENT AMENDA	/FNT			
LLOW INSTRUCTIONS (front and					
NAME & PHONE OF CONTACT AT	FILER (optional)		_	.•	
Marilyn MCCue 20					
SEND ACKNOWLEDGMENT TO:	(Name and Address)				
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INITIAL FINANCING STATEMENT FILE	#	THE ABOVE		FILING OFFICE U	
2000-43399 Shelby Co			to be ∙	filed (for record) (or re-	
		above is terminated with respect to security interest(s) of		ESTATE RECORDS.  authorizing this Termin	ation Statement
	عدي مسببس بسماي سن الرحنة المناطقة المن	fied above with respect to security interest(s) of the Sec			
continued for the additional period pr					
ASSIGNMENT (full or partial): Give	e name of assignee in item 7a or	7b and address of assignee in item 7c; and also give nam	ne of assignor in ite	m 9.	
AMENDMENT (PARTY INFORMAT	10N): This Amendment affects	Debtor of Secured Party of record. Check on	nly <u>one</u> of these tw	o boxes.	
Also check one of the following three box	es <u>and</u> provide appropriate informa	ation in items 6 and/or 7.			
CHANGE name and/or address: Pleasing the name/address:	• •	DELETE name: Give record name to be deleted in item 6a or 6b.	ADD na item 7c:	me: Complete item 7a also complete items 7	or 7b, and also 6-7g (if applicable).
CURRENT RECORD INFORMATION:	·				
6a. ORGANIZATION'S NAME	TTD				
Caldwell Mill,	LLP 				Text reference
66. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NA	ME	SUFFIX
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CHANGED (NEW) OR ADDED INFOR	MATION:				
CHANGED (NEW) OR ADDED INFOR	MATION:				
7a. ORGANIZATION'S NAME	MATION:	IFIRST NAME	MIDDLE N	AME	SUFFIX
7a. ORGANIZATION'S NAME	MATION:	FIRST NAME	MIDDLE N	AME	SUFFiX
7a. ORGANIZATION'S NAME	MATION:			AME POSTAL CODE	SUFFIX
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME	MATION:	FIRST NAME CITY			
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS   ADD'L INFO	RE [7e. TYPE OF ORGANIZAT	CITY	STATE		COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS   ADD'L INFO ORGANIZATIONS	RE [7e. TYPE OF ORGANIZAT	CITY	STATE	POSTAL CODE	COUNTRY
79. ORGANIZATION'S NAME  79. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS   ADD'L INFO ORGANIZAT DEBTOR	RE 70. TYPE OF ORGANIZATI	CITY	STATE	POSTAL CODE	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS ADD'L INFO ORGANIZATOEBTOR  AMENDMENT (COLLATERAL CHA	RE 7e. TYPE OF ORGANIZATE TION  NGE): check only one box.	CITY  ON 71. JURISDICTION OF ORGANIZATION	STATE 7g. ORGAN	POSTAL CODE	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS ADD'L INFO ORGANIZATOEBTOR  AMENDMENT (COLLATERAL CHA	RE 7e. TYPE OF ORGANIZATE TION  NGE): check only one box.	CITY	STATE 7g. ORGAN	POSTAL CODE	COUNTRY
79. ORGANIZATION'S NAME  75. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS ADD'L INFO ORGANIZAT DEBTOR  AMENDMENT (COLLATERAL CHA	RE 7e. TYPE OF ORGANIZATE TION  NGE): check only one box.	CITY  ON 71. JURISDICTION OF ORGANIZATION	STATE 7g. ORGAN	POSTAL CODE	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS ADD'L INFO ORGANIZATOEBTOR  AMENDMENT (COLLATERAL CHA	RE 7e. TYPE OF ORGANIZATE TION WGE): check only one box. dded, or give entire restated	CITY  ON 71. JURISDICTION OF ORGANIZATION	STATE 7g. ORGAN	POSTAL CODE	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS ORGANIZATIONS ORGANIZATIONS  AMENDMENT (COLLATERAL CHAP)  Partial Release:	RE 76. TYPE OF ORGANIZATE TION  NGE): check only one box. dded, or give entire restated	CITY  ON 7f. JURISDICTION OF ORGANIZATION  collateral description, or describe collateral assign	7g. ORGAN	POSTAL CODE	COUNTRY
7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS ORGANIZATIONS ORGANIZATIONS AMENDMENT (COLLATERAL CHAP) Describe collateral Co	RE 76. TYPE OF ORGANIZATION  NGE): check only one box.  dded, or give entire restated  ng to the Surve	CITY  HON 71. JURISDICTION OF ORGANIZATION  collateral description, or describe collateral assign  by of Phase Four Caldwell (	7g. ORGAN	NZATIONAL ID #, if and	country or as
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7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  MAILING ADDRESS  SEE INSTRUCTIONS  ADD'L INFOORGANIZATIONS  AMENDMENT (COLLATERAL CHAPTER COLLATERAL CHAPTER)  Partial Release:  Lot 234, according recorded in Map  NAME of SECURED PARTY of Italian authorizing December 1 and 1 an	RE 70. TYPE OF ORGANIZATION  NGE): check only one box.  dded, or give entire restated  RECORD AUTHORIZING THe btor, or if this is a Termination author.	CITY  ON 7. JURISDICTION OF ORGANIZATION  collateral description, or describe collateral assign  sy of Phase Four Caldwell (  , in the Probate Office of	7g. ORGAN  Tossings  E Shelby  The second of this is an DEBTOR authorized.	, 2nd Sectocounty, Alacounty, Alacounty, Alacounty, Alacounty, and this Amendment.	or as abama