UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY			ENT	20100713000222650 1/1 \$29.00 Shelby Cnty Judge of Probate, AL		
NAME & PHONE OF (		ILER [optional]		07/13/2010 02:28:39 PM FI	LED/CERT	
RUFFIN/205.226 SEND ACKNOWLEDG		mo and Addross	<del>~</del>			
ALABAMA 600 NORTH BIRMINGH	POWER CO	OMPANY EET				
			THI	- AROVE SPACE IS SOR FILLING OFFICE		
INITIAL FINANCING STA		0050812000414870/81		ABOVE SPACE IS FOR FILING OFFIC  1b. This FINANCING STAT		
TEDIMATE		20050812000414870/SF		to be filed [for record] (c	or recorded) in the	
CONTINUATION:	Effectiveness of the	Financing Statement identified above e Financing Statement identified a ded by applicable law.	re is terminated with respect to security in above with respect to security interest(s)	terest(s) of the Secured Party authorizing this Te	ermination Statement	
ASSIGNMENT (full	or partial): Give na	ame of assignee in item 7a or 7b a	nd address of assignee in item 7c; and als	SO give name of assignor in itom 0	······································	
AMENDMENT (PART)	INFORMATION			Check only one of these two boxes.		
Also check <u>one</u> of the follow	ving three boxes ar	nd provide appropriate information	in items 6 and/or 7.	Ones, only phis of these two poxes.		
Thame (II hante change)	in item 7a or 7b ar	rent record name in item 6a or 6b; and/or new address (if address chan	also give new DELETE name: Ginge) in item 7c. to be deleted in ite	ive record name ADD name: Complete im 6a or 6b. item 7c; also complete	item 7a or 7b, and als	
6a. ORGANIZATION'S N	FORMATION:			The first in the state of the s	items /u-/g (if applic	
Ou. Ortomitization 5 iv	AIVIE					
6b. INDIVIDUAL'S LAST	NAME		FIRST NAME			
BIDDY			JOSEPH	MIDDLE NAME	SUFFIX	
CHANGED (NEW) OR A	DDED INFORMAT	TION.		E.	JR.	
7a. ORGANIZATION'S N						
7b. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE NAME	SUFFIX	
BIDDY			SUSAN	R.		
MAILING ADDRESS			CITY	STATE POSTAL CODE	COUNTR	
60 CAMELIA LI			MAYLENE	AL 35114		
TAX ID #: SSN OR EIN	ORGANIZATION DEBTOR		7f. JURISDICTION OF ORGANIZAT	ION 7g. ORGANIZATIONAL ID #, if	any	
MENDMENT (COLLA	TERAL CHANGI	E): check only <u>one</u> box.				
		y y y y y y y y y y y y y y y y y y y	eral description, or describe collateral	assigned.		
AME OF SECURED P	ARTY of RECO	ORD AUTHORIZING THIS AN	AENDMENT (name of accious a section of acciding to the section of acciding	an Assignment). If this is an Amendment author		
ds collateral or adds the au	ME	or it tills is a retrialiation authorized	by a Debtor, check here and enter r	an Assignment). If this is an Amendment author name of DEBTOR authorizing this Amendment.	ized by a Debtor whic	
	WER COMP	ANY				
ALABAMA PO	<u> </u>					
ALABAMA PO	<u> </u>		FIRST NAME	MIDDLE NAME	SUFFIX	