



UCC FINANCING STATEMENT

	S (front and back)					
A. NAME & PHONE OF CO		- • -				
Corporation Service	<u> </u>	800-858-5294 				
3. SEND ACKNOWLEDG	MENT TO: (Nam	e and Address)				
52952350 - 363	3950					
Prepared By	y :					
•	Service Con	npany				
•	tevenson Dri	-				
	IL 62703-426					
Opinightia,	02,00 .2	Filed In: Alaba	ama Shelby			
<u>L</u>			THE ABOVE	SPACE IS FO	R FILING OFFICE US	SEONLY
. DEBTOR'S EXACT FU	LL LEGAL NAME -	insert only <u>one</u> debtor name (1a or 1b)) - do not abbreviate or combine names			
1a. ORGANIZATION'S NA						
16. INDIVIDUAL'S LAST N	AME	· · · · · · · · · · · · · · · · · · ·	FIRST NAME	MIDDLE	NAME	SUFFIX
RUPERTUS			JACK			
c. MAILING ADDRESS 18	7 FLAGSTO	NE LN	CITY	STATE	POSTAL CODE	COUNTRY
			Calera	AL	35040	USA
d. SEE INSTRUCTIONS		1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID#, if any	<u> </u>
	ORGANIZATION DEBTOR	· 	· [ŀ		NON
ADDITIONAL DERTOR	S'S EXACT FULL	LEGAL NAME - insert only one d	lebtor name (2a or 2b) - do not abbreviate or comb	hine names	· · · · · · · · · · · · · · · · · · ·	
2a. ORGANIZATION'S NA	(O EXACT TOLL	FEOVE INVITE - HISCH OILL ONE O				
	AME		ichtor Harric (Zu or Zb) do not abbreviate or dorna	Unite Hairies		· · · · · · · · · · · · · · · · · · ·
	AME		ichtof flatific (Zu of Zb) do flot ubblichtate of doffit.	Offic Hairies		· · · · · · · · · · · · · · · · · · ·
OR 2b. INDIVIDUAL'S LAST I			FIRST NAME	MIDDLE	NAME	SUFFIX
¬□					NAME	SUFFIX
¬□					NAME POSTAL CODE	SUFFIX
2b. INDIVIDUAL'S LAST I			FIRST NAME	MIDDLE	<u>.</u>	
2b. INDIVIDUAL'S LAST I	NAME	2e. TYPE OF ORGANIZATION	FIRST NAME	MIDDLE	<u>.</u>	COUNTRY
2b. INDIVIDUAL'S LAST I	ADD'L INFO RE ORGANIZATION		FIRST NAME CITY	MIDDLE	POSTAL CODE	COUNTRY
2b. INDIVIDUAL'S LAST I	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION	MIDDLE	POSTAL CODE	COUNTRY
2b. INDIVIDUAL'S LAST I	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of T	2e. TYPE OF ORGANIZATION OTAL ASSIGNEE of ASSIGNOR S/F	FIRST NAME CITY	MIDDLE	POSTAL CODE	COUNTRY
2b. INDIVIDUAL'S LAST I	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of T	2e. TYPE OF ORGANIZATION OTAL ASSIGNEE of ASSIGNOR S/F	FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION	MIDDLE	POSTAL CODE	COUNTRY
2b. INDIVIDUAL'S LAST I	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of TAME) AME Preferred	2e. TYPE OF ORGANIZATION OTAL ASSIGNEE of ASSIGNOR S/F	FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION	MIDDLE	POSTAL CODE ANIZATIONAL ID #, if any	COUNTRY
2b. INDIVIDUAL'S LAST I	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of TAME) AME Preferred	2e. TYPE OF ORGANIZATION OTAL ASSIGNEE of ASSIGNOR S/F	FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION P) - insert only one secured party name (3a or 3b)	STATE 2g. ORG	POSTAL CODE ANIZATIONAL ID #, if any	COUNTRY
2b. INDIVIDUAL'S LAST IDEA. 2c. MAILING ADDRESS 2d. SEEINSTRUCTIONS 3a. ORGANIZATION'S NATURE OF SECURE	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of T	2e. TYPE OF ORGANIZATION OTAL ASSIGNEE of ASSIGNOR S/F d Credit, Inc	FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION P) - insert only one secured party name (3a or 3b)	STATE 2g. ORG	POSTAL CODE ANIZATIONAL ID #, if any	COUNTRY
2b. INDIVIDUAL'S LAST IDEA. 2c. MAILING ADDRESS 2d. SEEINSTRUCTIONS 3a. ORGANIZATION'S NATURE OF SECURE	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of TAME) AME Preferred	2e. TYPE OF ORGANIZATION OTAL ASSIGNEE of ASSIGNOR S/F d Credit, Inc	FIRST NAME 2f. JURISDICTION OF ORGANIZATION P) - insert only one secured party name (3a or 3b) FIRST NAME	MIDDLE 2g. ORG	POSTAL CODE ANIZATIONAL ID #, if any NAME	COUNTRY
2b. INDIVIDUAL'S LAST IDEA. 2c. MAILING ADDRESS 2d. SEE INSTRUCTIONS 3a. ORGANIZATION'S NATURE OF SECURIAL S	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of TAME) NAME NAME NAME NAME	2e. TYPE OF ORGANIZATION TOTAL ASSIGNEE of ASSIGNOR S/F Total Credit, Inc D, #200	FIRST NAME 2f. JURISDICTION OF ORGANIZATION P) - insert only one secured party name (3a or 3b) FIRST NAME CITY	MIDDLE STATE STATE	POSTAL CODE NAME POSTAL CODE	COUNTRY
2b. INDIVIDUAL'S LAST IDEA. 2c. MAILING ADDRESS 2d. SEEINSTRUCTIONS 3a. ORGANIZATION'S NATURE OF SECURIAL SE	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of TAME Preferred NAME NAME	2e. TYPE OF ORGANIZATION TOTAL ASSIGNEE of ASSIGNOR S/E d Credit, Inc o, #200	FIRST NAME 2f. JURISDICTION OF ORGANIZATION P) - insert only one secured party name (3a or 3b) FIRST NAME CITY	MIDDLE STATE STATE	POSTAL CODE NAME POSTAL CODE	COUNTRY
2b. INDIVIDUAL'S LAST IDEA. 2c. MAILING ADDRESS 2d. SECURED PARTY'S 3a. ORGANIZATION'S NA 3b. INDIVIDUAL'S LAST IDEA 3c. MAILING ADDRESS 4. This FINANCING STATEME **Purchase money see	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of TAME Preferred NAME NAME NAME OTHER OF THE CONTROL OF T	2e. TYPE OF ORGANIZATION TOTAL ASSIGNEE of ASSIGNOR S/E Credit, Inc O, #200 ring collateral:**	FIRST NAME 2f. JURISDICTION OF ORGANIZATION P)-insert only one secured party name (3a or 3b) FIRST NAME CITY St. Cloud	MIDDLE 2g. ORG MIDDLE STATE MN	POSTAL CODE NAME POSTAL CODE 56301	COUNTRY
2b. INDIVIDUAL'S LAST IDEA. 2c. MAILING ADDRESS 2d. SECURED PARTY'S 3a. ORGANIZATION'S NA 3b. INDIVIDUAL'S LAST IDEA 3c. MAILING ADDRESS 4. This FINANCING STATEME **Purchase money see	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of TAME Preferred NAME NAME NAME OTHER OF THE CONTROL OF T	2e. TYPE OF ORGANIZATION TOTAL ASSIGNEE of ASSIGNOR S/E Credit, Inc O, #200 ring collateral:**	FIRST NAME 2f. JURISDICTION OF ORGANIZATION P) - insert only one secured party name (3a or 3b) FIRST NAME CITY	MIDDLE 2g. ORG MIDDLE STATE MN	POSTAL CODE NAME POSTAL CODE 56301	COUNTRY
2b. INDIVIDUAL'S LAST IDEA. 2c. MAILING ADDRESS 2d. SECURED PARTY'S 3a. ORGANIZATION'S NA 3b. INDIVIDUAL'S LAST IDEA 3c. MAILING ADDRESS 4. This FINANCING STATEME **Purchase money see	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of I	2e. TYPE OF ORGANIZATION TOTAL ASSIGNEE of ASSIGNOR S/E Credit, Inc O, #200 ving collateral:** EATMENT SYSTEM SERIA	FIRST NAME 2f. JURISDICTION OF ORGANIZATION P)-insert only one secured party name (3a or 3b) FIRST NAME CITY St. Cloud	MIDDLE 2g. ORG MIDDLE STATE MN	POSTAL CODE NAME POSTAL CODE 56301	COUNTRY
2b. INDIVIDUAL'S LAST INDIVIDU	ADD'L INFO RE ORGANIZATION DEBTOR NAME (or NAME of I	2e. TYPE OF ORGANIZATION TOTAL ASSIGNEE of ASSIGNOR S/E Credit, Inc O, #200 ving collateral:** EATMENT SYSTEM SERIA	FIRST NAME 2f. JURISDICTION OF ORGANIZATION P)-insert only one secured party name (3a or 3b) FIRST NAME CITY St. Cloud	MIDDLE 2g. ORG MIDDLE STATE MN	POSTAL CODE NAME POSTAL CODE 56301	COUNTRY

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5. ALTERNATIVE DESIGNATION [if applicable]	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be file	ed [for record] (or recorded)	in the REAL 7. Check to REC	QUEST SEARCH REPOR	RT(S) on Debtor(s)	All Debtors	Debtor 1 Debtor 2

8. OPTIONAL FILER REFERENCE DATA 01075842

52952350



09/24/2010 02:13:24 PM FILED/CERT

NAME OF FIRST DEBT	OR (1a or 1b) C	ON RELATED FINANCING STA	TEMENT				
9a. ORGANIZATION'S NAM	ΛΕ						
₹							
	. INDIVIDUAL'S LAST NAME FIRST NAME		MIDDLE NAME, SUF	FIX			
RUPERTUS		JACK					
MISCELLANEOUS:	<u> </u>						
				•			
				THE A	BOVE SPACE	S FOR FILING OFFI	CE USE ONLY
ADDITIONAL DEBTO	R'S EXACT FUL	L LEGAL NAME - insert only <u>one</u>	name (11a or 11b) - do not ab	breviate or combine	names		
11a. ORGANIZATION'S NA	ME						
						·····	
11b. INDIVIDUAL'S LAST I	IAME		FIRST NAME		MIDDLE	NAME	SUFFIX
MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
SEEINSTRUCTIONS	ADD'L INFO RE	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF OF	RGANIZATION	11g. ORG	SANIZATIONAL ID #, if a	ny
	ORGANIZATION DEBTOR		1				NO
ADDITIONAL SEC	JRED PARTY	'S or ASSIGNOR S/P'S	NAME - insert only <u>one</u> n	ame (12a or 12b)			
12a, ORGANIZATION'S NA						· · · · · · · · · · · · · · · · · ·	
12b. INDIVIDUAL'S LAST I	NAME		FIRST NAME		MIDDLE	MIDDLE NAME	
. MAILING ADDRESS		· · · · · · · · · · · · · · · · · · ·	CITY		STATE	POSTAL CODE	COUNTRY
This FINANCING STATEM	ENT covers tin	nber to be cut or as-extracted	16. Additional collateral d	escription:			
collateral, or is filed as a	fixture filing.						
Description of real estate:							
UBD: CAMDEN COV		_ ·					
OT 160 SEC 16 TWN		/V					
ARCEL 2851620040	12000						
HELBY COUNTY, AL							
, . , ,							
		above-described real estate					
(if Debtor does not have a	ecord interest):						
CK RUPERTUS							
7 FLAGSTONE LN			17. Check <u>only</u> if applicab	le and check only o	ne box.		
ALERA AL 35040						roperty held in trust or	Decedent's Est
			18. Check only if applicab			opolity hold in tiust. Of	Decedent's Est
			To. Check only it applicab	ue and check billy o	IIC DUA.		
			Debtor is a TRANSMI				
			Debtor is a TRANSMI Filed in connection with Filed in connection with the second connection with the	th a Manufactured-l			