	C FINANCING STATEMENT AMEND LOW INSTRUCTIONS (front and back) CAREFULLY	MENT) ORIC:	AL
A. N Ka	NAME & PHONE OF CONTACT AT FILER [optional] ylon Mikula 205-226-1402 SEND ACKNOWLEDGMENT TO: (Name and Address)					
	Alabama Power Company 600 18th St N Birmingham, AL 35203		2015082100 Shelby Cni 08/21/2015	00291900 y Judge c	1/2 \$.00 of Probate, AL PM FILED/CERT	
		_	THE ABOVE	SPACE IS FO	OR FILING OFFICE US	E ONLY
la. I	NITIAL FINANCING STATEMENT FILE # 2010072600023638	80		r to	is FINANCING STATEMEN be filed [for record] (or rec	
2.	TERMINATION: Effectiveness of the Financing Statement identified	ed above is terminated with	respect to security interest(s) of		AL ESTATE RECORDS. Introduction of the state of the stat	ation Statement.
3.	CONTINUATION: Effectiveness of the Financing Statement iden continued for the additional period provided by applicable law.	ntified above with respect	to security interest(s) of the Secu	red Party auth	orizing this Continuation S	Statement is
4. -	ASSIGNMENT (full or partial): Give name of assignee in item 7a	or 7b and address of assign	nee in item 7c: and also give nam	e of assignor in	item 9.	
5. <i>F</i>	MENDMENT (PARTY INFORMATION): This Amendment affect			-		
	Iso check one of the following three boxes and provide appropriate inform	tund tund		,		
	CHANGE name and/or address: Give current record name in item 6a name (if name change) in item 7a or 7b and/or new address (if address	or 6b; also give new ss change) in item 7c.	DELETE name: Give record reto be deleted in item 6a or 6b.		DD name: Complete item em 7c; also complete items	7a or 7b, and also 7d-7g (if applicab
	CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME				<u>,, , , , , , , , , , , , , , , , , , ,</u>	
OR	6b. INDIVIDUAL'S LAST NAME NORRIS	FIRST NAME		MIDDLE	NAME	SUFFIX
		WILLIA	WILLIAM		U	
7. (CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	<u></u>	······································	· ··· · · · · · · · · · · · · · · · ·	······································	
OR		·	<u> </u>			SUFFIX
	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	TAMMY		MIDDLE NAME E	
·····	NORRIS MAILING ADDRESS	CITY			IPOSTAL CODE	COUNTRY
	189 WEATHERFORD DRIVE	BHAM		STATE	35242	US
7d.	TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	ATION 7f. JURISDIC	TION OF ORGANIZATION	7g. ORG	SANIZATIONAL ID #, if any	/
	AMENDMENT (COLLATERAL CHANGE): check only one box. Pescribe collateral deleted or added, or give entire restate AMENDMENT (COLLATERAL CHANGE): check only one box. Pescribe collateral deleted or added, or give entire restate Pescribe collateral	THIS AMENDMENT (na	me of assignor, if this is an Assig	nment). If this i		d by a Debtor whic
	idds collateral or adds the authorizing Debtor, or if this is a Termination a	composite by a bobion.	1	, _, _,	~	
а						
а	dds collateral or adds the authorizing Debtor, or if this is a Termination a					
a OR	dds collateral or adds the authorizing Debtor, or if this is a Termination a 9a. ORGANIZATION'S NAME	FIRST NAME		MIDDLE	NAME	SUFFIX

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20100726000236380 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR Alabama Power Company 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

20150821000291900 2/2 \$.00 Shelby Cnty Judge of Probate, AL 08/21/2015 03:15:13 PM FILED/CERT

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