A. NAME & PHONE OF CONTACT AT FILER (optional) CINDY THOMAS 205-326-8299 B. E-MAIL CONTACT AT FILER (optional)		20160726000259510 1/2 \$42.95 Shelby Cnty Judge of Probate, AL			
C. SEND ACKNOWLEDGMENT TO: (Name and Add ALABAMA GAS CORPOI 2101 6TH AVE NORTH BIRMINGHAM, AL 35203	RATION	07/26/2016 07:			
DEBTOR'S NAME: Provide only one Debtor name (1a	<u>· · ·</u>	r abbreviate any part of the	Debtor		dividual Deb
name will not fit in line 1b, leave all of item 1 blank, check h 1a. ORGANIZATION'S NAME	nere and provide the Individual Debtor information		uig Sta	Rement Addendam (Form UC	
1b. INDIVIDUAL'S SURNAME WELLS	FIRST PERSONAL NAME VIRGIL	‡	ADDITIONAL NAME(S)/INITIAL(S) GUYTON		SUFFIX
c. MAILING ADDRESS 568 RUSSET BEND DR	HOOVER		TATE	POSTAL CODE 35244-4328	COUNTR
SECURED PARTY'S NAME (or NAME of ASSIGNED 3a. ORGANIZATION'S NAME		one Secured Party name (3	3a or 3b)	
JOB. CITOCITIES INSTITE	FIRST PERSONAL NAME	AI	DDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
ALABAMA GAS CORPORAT		s ⁻	TATE	POSTAL CODE 35203	COUNTR
ALABAMA GAS CORPORAT	CITY BIRMINGHA wing collateral:	M			

8. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 20160726000259510 2/2 \$42.95 9a. ORGANIZATION'S NAME Shelby Cnty Judge of Probate, AL 07/26/2016 07:54:45 AM FILED/CERT 9b. INDIVIDUAL'S SURNAME WELLS FIRST PERSONAL NAME VIRGIL SUFFIX ADDITIONAL NAME(S)/INITIAL(S) III **GUYTON** THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) COUNTRY POSTAL CODE 10c. MAILING ADDRESS CITY STATE ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME BROWN HEATING AND COOLING SUFFIX ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME 11b. INDIVIDUAL'S SURNAME COUNTRY POSTAL CODE STATE 11c. MAILING ADDRESS US 35023 HUEYTOWN AL 400 BROOKLANE DR 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) is filed as a fixture filing covers timber to be cut covers as-extracted collateral 16. Description of real estate: 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): 568 RUSSET BEND DR BIRMINGHAM, AL 35244-4328 LEGAL DESCRIPTION LOT 20 RUSSET BEND MAP BOOK 11 MAP PAGE 052 PARCEL # 13 3 06 0 001 003.030 SHELBY COUNTY, ALABAMA 17. MISCELLANEOUS: