A NAME & PHONE OF CONTACT AT FILER (optional) Kaylon Mikula 205-226-1409 B. SEND ACKNOWLEDGMENT TO: (Name and Address) Alabama Power Company 600 18th S1 N Birmingham, AL 35203 Alabama Power Alab	UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY				A ORIGINAL			
Alabama Power Company 600 I 8th St N Birmingham, AL 35203 ***PROPERTY OF THE PROPERTY OF 19 and 19	A. NAME & PHONE OF C	CONTACT AT FILER [optional]						
Alabama Power Company 600 18th St N Birmingham, AL 35203 ***PRINCIPAL FinAncin Co. STATEMENT FILE #** 20130904000358950 ***THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1721/16/2016 09 145, 50 pm of FILED/CERT 1721/16/2016 09 145, 50 pm of								
Birmingham. AL 35203	5. GEND ACKNOWLEDC	NVICINT TO: (Name and Address)	_	_				
Birmingham, AL 35203	 							
Birmingham, AL 35203		- ·				n 1 (01) 663 283 (1 6)}		
THE ABOVE SPACE IS OR F. FILED/CERT 12 /16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 /16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 /16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 /16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 /16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 12 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 13 / 16 / 2016 69 : 45 : 50 AF, F. FILED/CERT 14 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, F. FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 15 / 2016 69 : 45 : 50 AF, FILED/CERT 16 / 2016 69 : 45 : 50 AF, FILED/CERT 16 / 2016 69 : 45 : 50 AF, FILED/CERT 16 / 2016 69 : 45 : 50 AF, FILED/CERT 16 / 201								
She Iby Only Judges 18-50 pm FILED/CERT THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SOURCE IS FOR FILING OFFICE USE ONLY THE ABOVE SOURCE IS FOR FILING OFFICE USE ONLY THE ABOVE SOURCE IS FOR FILING OFFICE USE ONLY THE ABOVE SOURCE IS FOR FILING OFFICE USE ONLY THE ABOVE SOURCE IS FOR FILING OFFI TO SECURE OF THE OFFI ABOVE SOURCE IS TO SECURE OFFI ABOVE SOURCE IS TO SECURE OF THE OFFI ABOVE SOURCE IS TO SECURE OFFI ABOVE SOURCE IS TO SECURE OFFI ABOVE SOURCE IS TO SECURE OF THE OFFI ABOVE SOURCE IS TO SECURE	_			20161216000458	420 1/2	\$.00 Probate, AL		
E. INTIAL FIRANCING STATEMENT FLE # 20130904000358950 TERMINATION: Esectiveness of the Financing Statement derified above is terminated with respect to security interests); of the Secured Party authorizing this Continuation Statement derified above is terminated with respect to security interests; of the Secured Party authorizing this Continuation Statement derified above with respect to security interests; of the Secured Party authorizing this Continuation Statement derified above with respect to security interests; of the Secured Party authorizing this Continuation Statement is continued to the additional privation give deviced by application in the Continuation Statement is continued to the additional privation give deviced by application of the Secured Party authorizing this Continuation Statement is continued to the additional privation give deviced by a peed of the secured Party authorizing this Continuation Statement is continued to the additional privation of the secured Party authorizing this Continuation Statement is continued to the additional privation statement is continued to the additional privation statement affects December of Secured Party of record. Check only ging of these two boxes	1					M FILED/CERT		
a. INTIAL FINANCING STATEMENT FALE 2013/09/40/00358950 The FINANCING STATEMENT ARROMANT to the Control of the			_					
TERMINATION: Effectiveness of the Financing Statement certified above is terminated with respect to security interestic; of the Secured Party authorizing this Continuation Statement in Continuation Provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided by applicable two continuations of the Additional pondo provided provided	a. INITIAL FINANCING STA	TEMENT FILE#		THE ABOVE S		•		
CONTINUATION Effectiveness of the Financing Statement dended above with respect to security interrect(s) of the Secured Party authorizing his Continuation Statement is continued to the additional period toy applicable law. ASSIGNMENT (Full or paticil) Give name of assignee in item 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and actives of assignee in litem 7 as 7 to and active					☐ to	be filed [for record] (or rec		
OCHTNIVATION. Effectiveness of the Financing Statement is continuad for the additional profice divided by applicable text. ASSIGNMENT (full or partiel): Give name of assignee in term 7a or 7b and acdress of assignee in item 7c; and also give name of assignor in item 9. AMENDMENT (full or partiel): Give name of assignee in term 7a or 7b and acdress of assignee in item 7c; and also give name of assignor in item 9. AMENDMENT (full or partiel): Give name of assignee in term 7a or 7b and acdress of assignee in item 7c; and also give name of assignor in item 9. AMENDMENT (FARTY INFORMATION): This Amendment affects	. X TERMINATION: Ef	fectiveness of the Financing Statement identified at	pove is terminated with	respect to security interest(s) of th			ation Statement.	
ASSIGNMENT (PARTY INFORMATION) ASSIGNMENT (PARTY INFORMATION) The Amendment affocts Dector or Secured Party of record: Check only ggg of these two boxes Also check one of the following littine boxes and provide appropriate information in terms is anotax / CITY (INFORMATION) The Amendment affocts Dector or Secured Party of record: Check only ggg of these two boxes Also check one of the following littine boxes and provide appropriate information in terms is anotax / CITY (INFORMATION) The COURTENT RECORD INFORMATION: So GREANIZATIONS NAME BIOLINOVIDUAL'S LAST NAME GIDDENS RAMANTHA W SUFFIX. GIDENS RAMANTHA W SUFFIX. CHANGED INFORMATION To INFORMATION NAME R 72 INDIVIDUAL'S LAST NAME GIDENS SAMANTHA W CHANGED INFORMATION To INDIVIDUAL'S LAST NAME GIDENS SAMANTHA W SUFFIX. TO INDIVIDUAL'S LAST NAME TO INDI	. CONTINUATION: 1	Effectiveness of the Financing Statement identified						
AMENDMENT (FARTY INFORMATION): This Amendment affects	continued for the addit	tional period provided by applicable law.						
Also detak care of the following free boxes app provide appropriate information in terms 6 and/or 7 inches to 50 into grame and/or address. (If address change) in term 7 inches 1 inch	. ASSIGNMENT (full	or partial): Give name of assignee in item 7a or 7b	and address of assign	iee in item 7c; and also give name	of assignor i	n item 9.		
CHANGE name and/or address. Give current record name in laten 8a or 8b. also give new name of mane of time telepting in term 7a or 7b and/or new address (if address change) in fem 7c. To be deleted in fem 6a or 8b. ADD name. Complete term 7a or 7b; and also give new name of mane of time telepting in term 7a. are 7b and/or new address. (if address change) in fem 7c. To be deleted in fem 6a or 8b. Iden 7c. also complete term 7a or 7b; and also give new name of address. Iden 7c. also complete term 7a or 7b; and also give new name of a deleted in fem 6a or 8b. Iden 7c. also complete term 7a or 7b; and also give new name of a deleted in fem 6a or 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also complete term 7a or 7b; and also give name of 8b. Iden 7c. also give name o		L.	·	cured Party of record. Check only	one of these	two boxes.		
Tank Park	CHANGE name and/or	address: Give current record name in item 6a or 6	b: also give new	T DELETE name: Give mond on	me 🖵	On name: Complete item:	7a or 7b ==== -1	
Su ORGANIZATION'S NAME R BU INDIVIDUAL'S LAST NAME GIDDENS SAMANTHA W CHANGED (NEW) OR ADDED INFORMATION: 70 ORGANIZATION'S NAME R TO INDIVIDUAL'S LAST NAME (AKA) REAVES SAMANTHA STATE POSTAL CODE COUNTRY ALABASTER AL 35007 US TAX ID # SSN OR EN AL 35007 US AMENING ADDRESS AL 35007 US AMENING ADDRESS ORGANIZATION DESCRIPTOR AMENING ADDRESS ORGANIZATION ORGANIZATION ORGANIZATION DESCRIPTOR AMENING ADDRESS ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION DESCRIPTOR AMENING ADDRESS ORGANIZATION ORGANIZATION DESCRIPTOR AMENING ADDRESS ORGANIZATION ORG	name (if name change)	in item 7a or 7b and/or new address (if address ch	nange) in item 7c.			tem 7c; also complete items	ra or 7b, and also 7d-7g (if applicab	
BE INDIVIDUAL'S LAST NAME GIDDENS SAMANTHA W SUFFIX SAMANTHA W CHANGED (NEW) OR ADDED INFORMATION 70 ORGANIZATION'S NAME R 71 INDIVIDUAL'S LAST NAME (AKA) REAVES MALING ADDRESS SAMANTHA SAMANTHA SAMANTHA TO INDIVIDUAL'S LAST NAME (AKA) REAVES MALING ADDRESS SAMANTHA SAMANTHA TO INDIVIDUAL'S LAST NAME FIRST NAME SAMANTHA SAMANTHA TO INDIVIDUAL'S LAST NAME SAMANTHA W SUFFIX SAMANTHA TO INDIVIDUAL'S LAST NAME SAMANTHA W SUFFIX SAMANTHA TO INDIVIDUAL'S LAST NAME SUFFIX SAMANTHA TO INDIVIDUAL'S LAST NAME SAMANTHA W SUFFIX SAMANTHA TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST NAME ALABASTER AL SOOOT TO US TO INDIVIDUAL'S LAST TO INDIVIDUAL'S LA					<u></u>		<u></u>	
GIDDENS CHANGED (NEW) OR ADDED INFORMATION: 72 ORGANIZATION'S NAME R R R R R R R R R R R R R								
CHANGED (NEW) OR ADDED INFORMATION: Ta ORGANIZATION'S NAME FIRST NAME SUFFIX	R 66. INDIVIDUAL'S LAST	NAME	FIRST NAME		MIDDLE	E NAME	İSHEFIX	
CHANGED (NEW) OR ADDED INFORMATION: 73 ORGANIZATION'S NAME (AKA) REAVES MARING ADDRESS MARING ADDRESS MARING ADDRESS MARING ADDRESS MARING ADDRESS ALABASTER AL 35007 US MARING F SSN OR ÈIN DOPLINFO RE 76 TYPE OF ORGANIZATION ORG	GIDDENS		SAMAN	THA	ļ			
TA ORGANIZATION'S NAME To INDIVIDUAL'S LAST NAME	CHANGED (NEW) OR A	DDED INFORMATION:						
AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment) If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor. or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.		·						
INAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment) NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Amendment authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 193 ORGANIZATION'S NAME Alabama Power Company MIDDLE NAME SAMANTHA								
MAILING ADDRESS 328 PEBBLE LN ALABASTER AL 35007 US TAX ID # SSN OR EIN ADDILINFO RE ORGANIZATION DEBTOR 76 TYPE OF ORGANIZATION DEBTOR 71 JURISDICTION OF ORGANIZATION 72 ORGANIZATION ALID #, if any DEBTOR 73 ORGANIZATION DEBTOR 74 TYPE OF ORGANIZATION 75 ORGANIZATION 75 ORGANIZATION 76 ORGANIZATION 76 ORGANIZATION 76 ORGANIZATION 76 ORGANIZATION 76 ORGANIZATION 77 ORGANIZATION 78 ORGANIZATION 79 ORGANIZ	76. INDIVIDUAL'S LAST				MIDDLE	MIDDLE NAME		
ALABASTER AL 35007 US TAX ID # SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any DEBTOR NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. Sa ORGANIZATION'S NAME Alabama Power Company			<u></u>	THA				
AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor whice adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 9a ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any Debtor whice and second to the authorizing this Amendment.				earth			COUNTRY	
AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor whice adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. [9a. ORGANIZATION'S NAME Alabama Power Company		TADDY INSO DE 170 TYPE OF OPCANIZATION			J			
AMENDMENT (COLLATERAL CHANGE), check only gine box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor whice adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME Alabama Power Company	I. TAX ID #. SON UK EIN	ORGANIZATION '	M. JURISDIC	HON OF ORGANIZATION	7/g. ORG	∌ANIZATIONAL ID #, if any		
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor whice adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME Alabama Power Company				···································		•	NOI	
								
	adds collateral or adds the a	authorizing Debtor, or if this is a Termination author AME					by a Debtor which	
	9a. ORGANIZATION'S NA Alabama Power	authorizing Debtor, or if this is a Termination author AME					l by a Debtor which	
	adds collateral or adds the a 9a. ORGANIZATION'S NA Alabama Power	authorizing Debtor, or if this is a Termination author AME Company	rized by a Debtor, chec		BTOR auth	orizing this Amendment.		

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20130904000358950 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

20161216000458420 2/2 \$.00 Shelby Cnty Judge of Probate: AL

12/16/2016 09:45:50 AM FILED/CERT

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY