

FINANCING STATEMENT AMENDMEN OW INSTRUCTIONS (front and back) CAREFULLY	NT					
ME & PHONE OF CONTACT AT FILER [optional]						
ya Tarbert 205-226-1403						
ND ACKNOWLEDGMENT TO: (Name and Address)						
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Alabama Power Company 600 18th St N						
Birmingham, AL 35203		20171129000427590 1/2 \$.00				
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		THE ABOVE SPA	CE IS FOR	R FILING OFFICE US	E ONLY	
TIAL FINANCING STATEMENT FILE # 20140213000041110			1	FINANCING STATEMEN filed [for record] (or record)		
			REAL ESTATE RECORDS.			
TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to	security interest(s) of the S	ecured Part	y authorizing this Termina	ition Statement.	
CONTINUATION: Effectiveness of the Financing Statement identified ab- continued for the additional period provided by applicable law	ove with respect to security i	interest(s) of the Secured I	Party autho	rizing this Continuation S	Statement is	
ASSIGNMENT (full or partial) Give name of assignee in item 7a or 7b and	daddress of assignee in item	7c; and also give name of a	ssignor in i	tem 9.		
IENDMENT (PARTY INFORMATION): This Amendment affects	- 	of record. Check only one	of these to	vo boxes		
check one of the following three boxes and provide appropriate information in		E name: Cive record name		Diname: Complete item i	7a or 7b, and also	
CHANGE name and/or address: Give current record name in item 6a or 6b; all name (if name change) in item 7a or 7b and/or new address (if address change	e) in item 7c. to be de	E name: Give record name eleted in item 6a or 6b	iten	7c, also complete items	7d-7g (if applicab	
IRRENT RECORD INFORMATION:						
a. ORGANIZATION'S NAME						
B. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME SUFFIX			
FITTS	JAMIE		E.			
	37 tiviliz	·	13.	 -		
HANGED (NEW) OR ADDED INFORMATION:	· · ·			<u> </u>	 	
a. ORGANIZATION'S NAME						
b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME SUFFIX		SUFFIX	
	EVAN		R.			
AILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
904 N DUBBLIN DR	HELENA		AL	35080	USA	
AX ID #: SSN OR EIN ADD LINFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF C	ORGANIZATION	7g. ORG/	ANIZATIONAL ID#, if an	у	
ORGANIZATION						
MENDMENT (COLLATERAL CHANGE): check only one box	<u> </u>	<u> </u>		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
scribe collateral deleted or added, or give entire restated collate						
AME OF SECURED PARTY OF RECORD AUTHORIZING THIS A des collateral or adds the authorizing Debtor, or if this is a Termination authoriz	MENDMENT (name of ass red by a Debtor, check here	and enter name of DEE	nt) If this is	s an Amendment authorizonizing this Amendment.	ed by a Debtor wh	
dds collateral or adds the authorizing Debtor, or if this is a Termination authoriz 9a. ORGANIZATION'S NAME	MENDMENT (name of ass red by a Debtor, check here	and enter name of DEE	nt) If this is	s an Amendment authoriz orizing this Amendment	ed by a Debtor wh	
dds collateral or adds the authorizing Debtor, or if this is a Termination authoriz	MENDMENT (name of asset by a Debtor, check here	and enter name of DEE	nt) If this is	ofizing this Americanera.	ed by a Debtor wh	

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20140213000041110 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

13. Use this space for additional information



Shelby Cnty Judge of Probate: AL 11/29/2017 09:42:06 AM FILED/CERT

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