

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

|                                                                                                                                                                              |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| A. NAME & PHONE OF CONTACT AT FILER (optional)<br>CSC 1-800-858-5294                                                                                                         |  |
| B. E-MAIL CONTACT AT FILER (optional)<br>SPRFiling@cscglobal.com                                                                                                             |  |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)<br><div>1555 53744<br/>CSC<br/>801 Adlai Stevenson Drive<br/>Springfield, IL 62703</div> <div>Filed In: Alabama (Shelby)</div> |  |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

|                                                                             |                                                                                                                                                                                                                                                      |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER<br>20171219000451170 12/19/2017 | 1b. <input checked="" type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS<br>Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13 |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

2. ☒ **TERMINATION:** Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☐ **ASSIGNMENT** (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ **CONTINUATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ **PARTY INFORMATION CHANGE:**  
Check one of these two boxes: ☐ Debtor or ☐ Secured Party of record **AND** Check one of these three boxes to:  
☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c ☐ ADD name: Complete item 7a or 7b, and item 7c ☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. **CURRENT RECORD INFORMATION:** Complete for Party Information Change - provide only one name (6a or 6b)

|    |                          |                     |                               |        |
|----|--------------------------|---------------------|-------------------------------|--------|
| OR | 6a. ORGANIZATION'S NAME  |                     |                               |        |
|    | 6b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

7. **CHANGED OR ADDED INFORMATION:** Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

|    |                                            |  |  |        |
|----|--------------------------------------------|--|--|--------|
| OR | 7a. ORGANIZATION'S NAME                    |  |  |        |
|    | 7b. INDIVIDUAL'S SURNAME                   |  |  |        |
|    | INDIVIDUAL'S FIRST PERSONAL NAME           |  |  |        |
|    | INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) |  |  | SUFFIX |

|                     |      |       |             |         |
|---------------------|------|-------|-------------|---------|
| 7c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
|---------------------|------|-------|-------------|---------|

8. ☐ **COLLATERAL CHANGE:** Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral  
Indicate collateral:

9. **NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT:** Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

|    |                                                         |                     |                               |        |
|----|---------------------------------------------------------|---------------------|-------------------------------|--------|
| OR | 9a. ORGANIZATION'S NAME<br>State Bank and Trust Company |                     |                               |        |
|    | 9b. INDIVIDUAL'S SURNAME                                | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

|                                                                                   |            |
|-----------------------------------------------------------------------------------|------------|
| 10. OPTIONAL FILER REFERENCE DATA: Debtor: MOUNTAIN EXPRESS OIL COMPANY - 6127706 | 1555 53744 |
|-----------------------------------------------------------------------------------|------------|



UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

|                                                                                                                |                                                          |        |
|----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|--------|
| 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form<br>20171219000451170 12/19/2017 |                                                          |        |
| 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form                                 |                                                          |        |
| OR                                                                                                             | 12a. ORGANIZATION'S NAME<br>State Bank and Trust Company |        |
|                                                                                                                |                                                          |        |
|                                                                                                                | 12b. INDIVIDUAL'S SURNAME                                |        |
|                                                                                                                | FIRST PERSONAL NAME                                      |        |
|                                                                                                                | ADDITIONAL NAME(S)/INITIAL(S)                            | SUFFIX |

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13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

|    |                                                       |                     |                               |        |
|----|-------------------------------------------------------|---------------------|-------------------------------|--------|
| OR | 13a. ORGANIZATION'S NAME MOUNTAIN EXPRESS OIL COMPANY |                     |                               |        |
|    | 13b. INDIVIDUAL'S SURNAME                             | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):



Filed and Recorded  
Official Public Records  
Judge of Probate, Shelby County Alabama, County  
Clerk  
Shelby County, AL  
11/29/2018 02:20:04 PM  
S.00 CHERRY  
20181129000418110

*Allen S. Byrd*

|                                                                                                                                                                                                                      |                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| 15. This FINANCING STATEMENT AMENDMENT:<br><input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing | 17. Description of real estate: |
| 16. Name and address of a RECORD OWNER of real estate described in item 17<br>(if Debtor does not have a record interest):                                                                                           |                                 |

18. MISCELLANEOUS:  
MOUNTAIN EXPRESS OIL COMPANY 6127706