| Shelt | 74 | | | | |
|--|--|--|--|--|---------------------------------------|
| UCC FINANCING STATEMENT AMENE FOLLOWINSTRUCTIONS | OMENT | | | | |
| A. NAME & PHONE OF CONTACT AT FILER (optional) DANELLE KING 205-326-8299 | | | | | |
| B. E-MAIL CONTACT AT FILER (optional) DANELLE.KING@SPIREENERGY.COM | | | | | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | <u> </u> | | | | |
| SPIRE ALABAMA INC FOR | MERLY | 20200429000 Shelby Cnty | | 1 \$.00 Probate, AL | |
| ALABAMA GAS CORPORAT 2101 6TH AVENUE NORTH | TION | 04/29/2020 | 09:20:39 | AM FILED/CERT | |
| BIRMINGHAM, AL 35203 | • | | | | |
| | | THE ABOVE S | SPACE IS FO | R FILING OFFICE USE (| ONLY |
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER 20140902000273690 | | 1b. This FINANCING STA (or recorded) in the R Filer: attach Amendmen | | NDMENT is to be filed [for in RECORDS on UCC3Ad] and provide Debto | |
| 2. TERMINATION: Effectiveness of the Financing Statement identifications. | entified above is terminated | B 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | The first of the f | |
| 3. ASSIGNMENT (full or partial): Provide name of Assignee in in For partial assignment, complete items 7 and 9 and also indicate | | | me of Assignor | in item 9 | |
| 4. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law | identified above with respec | et to the security interest(s) of | Secured Party | authorizing this Continuation | n Statement is |
| 5. PARTY INFORMATION CHANGE: | | | | | <u> </u> |
| Check one of these two boxes: | D Check <u>one</u> of these three I ברדן CHANGE name and/or | address: CompleteADD | name: Comple | | |
| This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information | item 6a or 6b; <u>and</u> item mation Change - provide only | | r 7b, <u>and</u> item 7 | to be deleted in it | em ba or bb |
| 6a. ORGANIZATION'S NAME | | | | | · · · · · · · · · · · · · · · · · · · |
| OR 6b. INDIVIDUAL'S SURNAME | 'S SURNAME FIRST PERSO | | NAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX | | SUFFIX |
| JACKSON | CKSON ALINE | | \mathbf{S} | | In . |
| 7. CHANGED OR ADDED INFORMATION: Complete for Assignment of Transportation of Transport of Trans | r Party Information Change - provide | only <u>one</u> name (7a or 7b) (use exact, | full name; do not or | nit, modify, or abbreviate any part of | the Debtor's name) |
| | · · · · · · · · · · · · · · · · · · · | | | | |
| 75. INDIVIDUAL'S SURNAME | | | | | |
| į. | | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | | | | SUFFIX |
| | CITY | | STATE | POSTAL CODE | SUFFIX |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | CITY PELHA | M | STATE | POSTAL CODE 35124 | |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS | PELHA | M DELETE collateral | AL | 35124 | COUNTRY |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2604 ROYAL CT | PELHA | F 1 | AL | 35124 | COUNTRY |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2604 ROYAL CT 8: COLLATERAL CHANGE: Also check one of these four boxes | PELHA | F 1 | AL | 35124 | COUNTRY |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2604 ROYAL CT 8: COLLATERAL CHANGE: Also check one of these four boxes | PELHA | F 1 | AL | 35124 | COUNTRY |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2604 ROYAL CT 8: COLLATERAL CHANGE: Also check one of these four boxes | PELHA | F 1 | AL | 35124 | COUNTRY |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2604 ROYAL CT 8: COLLATERAL CHANGE: Also check one of these four boxes | PELHA | F 1 | AL | 35124 | COUNTRY |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2604 ROYAL CT 8: COLLATERAL CHANGE: Also check one of these four boxes | PELHA S: ADD collateral NG THIS AMENDMENT: | Provide only one name (9a or 9 | RESTATE | 35124 covered collateral | COUNTRY US |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2604 ROYAL CT 8: COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral: 9. NAME of SECURED PARTY of RECORD AUTHORIZIN If this is an Amendment authorized by a DEBTOR, check here 9a. ORGANIZATION'S NAME | PELHA S: ADD collateral NG THIS AMENDMENT: and provide name of authoriz | Provide only one name (9a or 9a ing Debtor | RESTATE of As | 35124 covered collateral | COUNTRY US |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2604 ROYAL CT 8: COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral: 9. NAME of SECURED PARTY of RECORD AUTHORIZIN If this is an Amendment authorized by a DEBTOR, check here 2 | PELHA S: ADD collateral NG THIS AMENDMENT: and provide name of authoriz | Provide only one name (9a or 9a ing Debtor | AL RESTATE of As ATION | 35124 covered collateral | COUNTRY US |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2604 ROYAL CT 8: COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral: 9. NAME of SECURED PARTY of RECORD AUTHORIZIN If this is an Amendment authorized by a DEBTOR, check here 9a. ORGANIZATION'S NAME SPIRE ALABAMA INC FORMER | PELHA S: ADD collateral NG THIS AMENDMENT: and provide name of authoriz LY ALABAMA | Provide only one name (9a or 9a ing Debtor | AL RESTATE of As ATION | signor, if this is an Assignme | COUNTRY US assign collateral |