CC FINANCING STATEMENT LLOW INSTRUCTIONS				
NAME & PHONE OF CONTACT AT FILER (optional)				
James H. Payne, Esq., 423-756-7000	<u> </u>			
E-MAIL CONTACT AT FILER (optional) jhp@smrw.com				
SEND ACKNOWLEDGMENT TO: (Name and Address)				
· · · · · · · · · · · · · · · · · · ·		20210826000	0416350 1/2	\$39.00
James H. Payne Spears, Moore, Rebman & Williams, P.C.				Probate, AL M FILED/CERT
P. O. Box 1749				
Chattanooga, TN 37401-1749				
		 		
DEBTOR'S NAME: Provide only one Debter name (1e or 1b) (ve		ABOVE SPACE IS FO		
DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (us name will not fit in line 1b, leave all of item 1 blank, check here	and provide the Individual Debtor information in ite			
1a. ORGANIZATION'S NAME Mashburn Outdoor, LLC				
15. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAT NAME/SY/N	ITIAL(S) ELIEEIV
	I INST PERSONAL NAME	וטוווטטאן	NAL NAME(S)/IN	ITIAL(S) SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
10 Crescent Moon Way	Canton	GA	30114	USA
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/IN	ITIAL(S) SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIG	GNOR SECURED PARTY): Provide only <u>one</u> Secu	ured Party name (3a or 3b))	
3a. ORGANIZATION'S NAME				
Pinnacle Bank 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	LADDITION	LAL BIASE (C) (IN	ITIAL (C) OUESIV
OD. INDOME O CONTAMIL	FIRST FERSONAL IVANIE	ADDITIO	NAL NAME(S)/IN	ITIAL(S) SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
01 Broad Street	Chattanooga	TN	37402	USA
COLLATERAL: This financing statement covers the following collate ll of Debtor's right, title and interest in and to herever located, whether now existing or here all fixtures and personal property of every leading block appearance received by the second (in the lead of	o all of the assets of the Debtor, is eafter from time to time arising of the land nature including all acc	or acquired: counts (including	health-car	e-insurance
eceivables), accounts receivable, goods (include policable, electronic documents), instruments edit, letter-of-credit rights (whether or not the roperty, general intangibles (including all payort claims, and any other contract rights or rights.	s, promissory notes, chattel paper ne letter of credit is evidenced by yment intangibles), money, depos ghts to the payment of money; (b	r (whether tangib a writing), secur sit accounts, insur o) all outdoor adv	le or electrities and alrance claim ertising bil	onic), letters of l other investme is, commercial llboards and sign
gether with all accessions, parts, and addition operty and all proceeds (including insurance roperty; and	ns and renovations to, all replace	ements of, and all	substitutio	ons for any of su
				#- D 1 D 1
	d in a Trust (see UCC1Ad, item 17 and Instruction	s) being administer	ed by a Deceder	it's Personal Representati
Check only if applicable and check only one box:		6b. Check only if	applicable and c	heck <u>only</u> one box:
Check only if applicable and check only one box: Collateral is held. Check only if applicable and check only one box: Public-Finance Transaction Manufactured-Home Transaction ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	nsaction A Debtor is a Transmitting Utili	6b. Check <u>only</u> if		

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 9a. ORGANIZATION'S NAME Mashburn Outdoor, LLC 20210826000416350 2/2 \$39.00 Shelby Cnty Judge of Probate, AL 9b. INDIVIDUAL'S SURNAME 08/26/2021 12:32:51 PM FILED/CERT FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 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 INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS COUNTRY CITY STATE POSTAL CODE ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) **SUFFIX** 11c. MAILING ADDRESS POSTAL CODE CITY STATE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): (c) all proceeds and products of each of the foregoing, all books and records relating to the foregoing, all supporting obligations related thereto, and all accessions to, substitutions and replacements for, and rents, profits and products of, each of the foregoing, and any and all proceeds of any insurance, indemnity, warranty or guaranty payable to the Debtor from time to time with respect to any of the foregoing. 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) covers timber to be cut is filed as a fixture filing covers as-extracted collateral 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): Seton Property Corporation of North Alabama Parcel No. 13 6 24 4 001 001.005 c/o St. Vincent's Health System Deed Ref.: Instrument No. 20190219000052450; Attn: Real Estate Office Instrument No. 20190219000052440 810 St. Vincent Drive General Description: Southeast quadrant of I-65 and Highway 52, in Birmingham, AL 35205 the City of Pelham, Shelby County, AL

17. MISCELLANEOUS: