

8. OPTIONAL FILER REFERENCE DATA:

\$8500.00

20220816000321450 08/16/2022 12:55:45 PM

UCC1 1/3 UCC FINANCING STATEMENT **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) KENT MCPHAIL & ASSOCIATES PO BOX 870 MOBILE, AL 36602-3226 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here 🔲 and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX THOMPSON BONNIE COUNTRY 1c. MAILING ADDRESS POSTAL CODE CITY STATE MONTEVALLO USA 84 ROSE LN 35115 DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here 🔲 and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME SUFFIX ADDITIONAL NAME(S)/INITIAL(S) 2c. MAILING ADDRESS STATE POSTAL CODE CITY COUNTRY 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME ALABAMA POWER COMPANY OR 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 1200 6[™] AVE N BIRMINGHAM 35203 $|\mathsf{AL}|$ 4. COLLATERAL: This financing statement covers the following collateral: HVAC Replacement, Heat Pump, 3.5 Ton Heil Heat Pump, N4H442GKP, X211044454, ICP \$8500.00 5. Check only if applicable and check only one box: Collateral is ___ held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative 6a. Check only if applicable and check only one box: 6b. Check only if applicable and check only one box: Public-Finance Transaction Agricultural Lien Manufactured-Home Transaction A Debtor is a Transmitting Utility Non-UCC Filing Seller/Buyer Lessee/Lessor Bailee/Bailor Licensee/Licensor 7. ALTERNATIVE DESIGNATION (if applicable): Consignee/Consignor

Shelby County

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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				4			
	9a. ORGANIZATION'S NAME						
				1			
OR	9b. INDIVIDUAL'S SURNAME THOMPSON						
	FIRST PERSONAL NAME			1			
	BONNIE						
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX		HE ABOVE	SPACE IS FOR FILING	OFFICE USE ONLY
10. DI	I EBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor name	e or Debtor name tha	at did not fit in line 1b o				
do	not omit, modify, or abbreviate any part of the Debtor's name) and enter the a. ORGANIZATION'S NAME	e mailing address in	line 1 0 c				
10	0b. INDIVIDUAL'S SURNAME						
OR	INDIVIDUAL'S FIRST PERSONAL NAME						
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
10c. MA	ILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
						35115	
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)							
11	a. ORGANIZATION'S NAME						
OR 11	b. INDIVIDUAL'S SURNAME	FIRST PERSONAL I	NA M E		ADDITIONAL NAME(S)/INITIAL(S)		
11c. M A	ILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
40.45							
12. AL	DITIONAL SPACE FOR ITEM 4 (Collateral):						
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the							7
15 No	REAL ESTATE RECORDS (if applicable)		overs timber to be cut		covers as-e	xtracted collateral	is filed as a fixture filing
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):					_	al: See Attachment; F	Parcel: 26 2 03 0 002
029.001; Owner: Bonnie Bell Thompso							
4 5							
17. MISCELLANEOUS:							

Please type or laser-print this form. Be sure it is completely legible. Read and follow all Instructions; use of the correct name for the Debtor is crucial.

THIS INSTRUMENT WAS PREPARED WITHOUT BENEFIT OF TITLE. LEGAL DESCRIPTION WAS PROVIDED BY GRANTOR.

This Instrument was prepared by: Mike T. Atchison P O Box 822 Columbiana, AL 35051

Send Tax Notice to: Wilson Bell 84 Rose Line Montevallo AL 35115

WARRANTY DEED

STATE OF ALABAMA) COUNTY OF SHELBY)

KNOW ALL MEN BY THESE PRESENTS, That in consideration TEN THOUSAND AND NO/00 DOLLARS (\$10,000.00), and other good and valuable considerations to the undersigned grantor (whether one or more), in hand paid by grantee herein, the receipt whereof is acknowledged, I or we, Ruby Rollan, a 5.34/2 woman, Bonnie B. Thompson, a 5 mg/s woman, Wilson E. Bell, a man, Thomas W. Bell, a 5 wy man and Preston R. Bell, a marrical man (herein referred to as Grantor) grant, bargain, sell and convey unto Bonnie Bell Thompson (herein referred to as Grantees), the following described real estate, situated in: SHELBY County, Alabama, to-wit:

Lot 2, according to the Bell Family Subdivision, as recorded in Map Book 44, Page 86, Probate Office Shelby County, Alabama.

SUBJECT TO:

- 1. Ad valorem taxes due and payable October 1, 2015.
- 2. Easements, restrictions, rights of way, and permits of record.

Grantors herein are all the surviving heirs at law of Lula Mae Bell, deceased, having died on April 9, 2004.

TO HAVE AND TO HOLD to the said grantee, his, her or their heirs and assigns forever.

And I (we) do for myself (ourselves) and for my (our) heirs, executors, and administrators covenant with the said Grantees, their heirs and assigns, and I am (we are) lawfully seized in fee simple of said premises, that they are free from all encumbrances unless otherwise noted above, that I (we) have a good right to sell and convey the same as aforesaid, that I (we) will, and my (our) heirs, executors and administrators shall, warrant and defend the same to the said Grantees, heirs, executors and assigns forever, against the lawful claims of all persons.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 30th day of April , 2015.

Wilson E. Bell

Shelby Cnty Judge of Probate, AL 05/12/2015 01:19:18 PM FILED/CERT Shelby County, AL 05/12/2015 State of Alabama Deed Tax:\$10.00

STATE OF ALABAMA) **COUNTY OF SHELBY)**

I, the undersigned authority, a Notary Public in and for said County, in said State hereby certify that Ruby Rollan, whose name is signed to the foregoing conveyance, and who is known to me acknowledged before me on this day, that, being informed of the contents of the conveyance, she executed the same voluntarily on the day the same bears date.

MINICHAF!

Thomas W. Bell

Notary Public

My Commission Expires:

Clerk 20220816000321450

Filed and Recorded Official Public Records Judge of Probate, Shelby County Alabama, County Shelby County, AL 08/16/2022 12:55:45 PM **\$53.75 BRITTANI**