							
	CC FINANCING STATEMENT AMENDME LLOW INSTRUCTIONS	NI					
	NAME & PHONE OF CONTACT AT FILER (optional)						
	RACHEL ADAMS						
	E-MAIL CONTACT AT FILER (optional) LOANS@SPIREENERGY.COM						
	SEND ACKNOWLEDGMENT TO: (Name and Address)						
H	SPIRE ALABAMA INC						
	20 20TH STREET SOUTH						
	BIRMINGHAM, AL 35233						
1a.	INITIAL FINANCING STATEMENT FILE NUMBER	-	b. This FINANCING STATES		R FILING OFFICE USE C ENDMENT is to be filed [for re		
20	221026000402120		(or recorded) in the REAL	ESIAIE	RECORDS m UCC3Ad) <u>and</u> provide Debtor		
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, <u>and</u> address of Assignee in item 7c <u>and</u> name of Assignor in item 9 For partial assignment, complete items 7 and 9 <u>and</u> 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:							
c	 Check one of these two boxes:	<u>one</u> of these three bo IANGE name and/or a		ne: Comple	ete item — DELETE name: 0	Sive record name	
			ddress: Complete ADD nangard and item 7c 7a or 7b,	and item 7	to be deleted in ite	em 6a or 6b	
O. V	6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b) 6a. ORGANIZATION'S NAME						
OR	6b. INDIVIDUAL'S SURNAME	FIDOT DEDOON	DEDOCNIAL NAME				
	MOUJDI	PAMEL.		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)							
7a. ORGANIZATION'S NAME							
OR	7b. INDIVIDUAL'S SURNAME						
	INDIVIDUAL'S FIRST DEDSONAL NAME						
	INDIVIDUAL'S FIRST PERSONAL NAME						
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX						
		LOITY		TOTATE	DOCTAL CODE	COLINITEN/	
	MAILING ADDRESS 51 9TH ST SW	ALABAS	STER	STATE	35007	US	
8.	COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral F		covered collateral A	SSIGN collateral	
	Indicate collateral:						
	Filed and Recorded Official Public Records						
	Judge of Probate, Shelby County Alabama, County Clerk Shelby County, AL						
			10/18/2023 01:41 \$.00 PAYGE				
			20231018000308	3210	alli 5. Bujl		
9 1	NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS	AMENDMENT	rovide only one name (9a or 9h) (i	name of As	eignor if this is an Assignmen	+\	
	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 part and provide name of authorizing Debtor						
	9a. ORGANIZATION'S NAME SPIRE ALABAMA INC						
OR		FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
10	OPTIONAL FILER REFERENCE DATA:						
TU.	OF HONAL FILEN NEFENEINGE DATA.						