

1. Return copy or recorded original to
BYARS AND COMPANY, INC.
P. O. Box 131269
Birmingham, Alabama 35213

Pre-paid Acct. # _____

2. Name and Address of Debtor (Last Name First if a Person)

**BMG Properties, an Alabama General
Partnership**
Suite 200, 2040 Valleydale Road
Birmingham, Alabama 35244

Social Security/Tax ID # _____

2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)

Social Security/Tax ID # _____

☐ Additional debtors on attached UCC-E

3. SECURED PARTY (Last Name First if a Person)
THE OHIO NATIONAL LIFE INSURANCE COMPANY
Post Office Box 237
Cincinnati, Ohio 45201

Social Security/Tax ID # _____

☐ Additional secured parties on attached UCC-E

5. ☒ This statement refers to original Financing Statement bearing File No. 017163
Filed with Judge of Probate, Shelby County

4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)

Date Filed May 27 19 87

6. ☒ Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.
7. ☐ Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.
8. ☐ Partial or ☐ Full. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4.
9. ☐ Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.
10. ☐ Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11. All of the equipment, fixtures, contract rights, general intangibles and tangible personal property of every nature as described in original filing.

11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

3 0 0
7 0 0
8 0 0

Check X if covered ☒ Products of Collateral are also covered.

Signature(s) of Debtor(s)

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Type Name of Individual or Business

Signature(s) of Secured Party(ies)

Signature(s) of Secured Party(ies)

THE OHIO NATIONAL LIFE INSURANCE COMPANY

Type Name of Individual or Business

(1) FILING OFFICER COPY — ALPHABETICAL
(2) FILING OFFICER COPY — NUMERICAL

(3) FILING OFFICER COPY — ACKNOWLEDGEMENT
(4) FILE COPY — SECOND PARTY(S)

(5) FILE COPY DEBTOR(S)

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3
Approved by The Secretary of State of Alabama

030859
STATE OF ALABAMA
I CERTIFY THAT THIS INSTRUMENT WAS FILED
92 MAR 30 1 PM 6:38
NOTARY PUBLIC
MICHAEL J. STOLBE