STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. FORM UCC-3

Important: Read Instructions on Back Before Filling out Form.

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATE	EMENT is presented to a Filing off niform Commercial Code.	icer for
Chrysler First P.O. Box 468029 Atlanta, GA 30346-8029		THIS SPACE FOR USE OF FILIN Date, Time, Number & Filing Offi	IG OFFICER	
Pre-paid Acct. #				
2. Name and Address of Debtor Strickland, Billy P.O. Box 265 Alabaster, AL Social Security/Tax ID #	9939726	erson)		CERTIFIED S.B. B.
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a P	Person)		
Social Security/Tax ID #		•		
☐ Additional debtors on attached UCC-E				
3. SECURED PARTY (Last Name First if a Person) MMAC P.O. Drawer 59808 Homewood, AL Social Security/Tax ID #		4. ASSIGNEE OF SECURED PA	RTY (IF ANY)	(Last Name First if a Person)
5. 🔯 This statement refers to original Financing Statem	ent bearing File No.	023371		
Filed with Shelby County		Date Filed	7-11 19.89	<u></u>
 6. Continuation. The original financing statement be 7. Termination. Secured Party no longer claims a s 8. Partial or The Secured Party's right under the property described in item 11 or to assignment. Whose name and address appears 9. Amendment Financing statement bearing file number shown above. 10. Partial Secured Party releases the collater number shown above. 	ecurity interest under the financing a financing statement bearing file of all of the property listed on this file in item 4. Imber shown above is amended as	g statement bearing the file number shown a number shown above to the e, is assigned to the assignee s set forth in item 11.		
Terminated 4-6-		ed 4-6-1992	114	Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
Check X if covered: Products of Collateral are also	covered.	Dano	Haew / Co	dit Man
Signature(s) of Debtor(s)		Signature(s) of Secured	<u> </u>	
Signature(s) of Debtor(s) (necessary only if item 9 is	s applicable)	Signature(s) of Secured	MMAC	
Type Name of Individual or Business		Type Name of Individua	BI OF BUSINESS STANDARD FORM — UNIFORM COM	MERCIAL CODE — FORM UCC-3

001-00061

(I) FILING OFFICER COPY-ALPHARETICAL

Approved by The Secretary of State of Alabama

PULL-A-PART BUSINESS FORMS PHONE 1-800-441-1020