STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. Important: Read Instructions on Back Before Filling out Form. This FINANCING STATEMENT is presented to a Filing Officer for tiling pursuant to the Uniform Commercial Code. The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n). No. of Additional Sheets Presented: THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office 1. Return copy or recorded original to CITICORP NATIONAL SERVICES, INC. ADD BELOW Pre-paid Acct. #__ 2. Name and Address of Debtor (Last Name First if a Person) KEISTER, JAMES R. ROUTE 1 BOX 301 K COLUMBIA, AL 9730 Social Security/Tax ID # 2A. Name and Address of Debtor (Last Name First if a Person) (IF ANY) FILED WITH: Social Security/Tax ID #. Additional debtors on attached UCC-E 3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person) (IF ANY) 4. ASSIGNEE OF SECURED PARTY CITICORP NATIONAL SERVICES, INC. 12443 OLIVE BLVD. ST. LOUIS, MO 63141 Social Security/Tax ID #_ Additional secured parties on attached UCC-E 026988 5. This statement refers to original Financing Statement bearing File No. . SHELBY COUNTY Date Filed 6. Continuation The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7. X Termination. Secured Party no longer claims a security interest under the linearcing statement bearing the file number allown above. 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 ☐ Full Assignment, 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. Secured Party releases the collateral described in item 11 from the financing statement bearing tile Release number shown above. 008 562678 11A. Enter Code(s) From Back of Form That Best Describes The Colleteral Covered By This Filing: 602

STATE OF ALABAMA - UNIFORM COMMERCIAL CODE

Check X II covered: Products of Collateral are also covered.	
	(lastines lem)
Signature(s) of Debtor(s)	Signature(s) of Secured Party(les
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Signature(s) of Secured Party(ies) CITICORP NATIONAL SERVICES, INC.
Type Name of Individual or Business	Type Name of Individual or Business
(1) FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY-ACKNOWLEDGEME (2) FILING OFFICER COPY - NUMERICAL (4) FILE COPY - SECURED	STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM (5) FILE COPY DEBTOR(S) STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM Approved by The Secretary of State of Alabama