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	No. of Additional	This FINANCING STATEMENT is presented to a	Filing Officer for
as defined in ALA CODE 7-9-105(n). 1. Return copy or recorded original to	Sheets Presented:	tiling pursuant to the Uniform Commercial Code THIS SPACE FOR USE OF FILING OFFICER	
Return to customer below.		Date, Time, Number & Filing Office	
Pre-paid Acct. #			Takes Desired
2. Name and Address of Debtor (Last Name First if a Person) Herron, Mark E.			
455 Pineview Road			
Montevallo, Al 35115			
			TO UE
Social Security/Tax ID #	:		
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		
			which the CC3
•			1) (L) 1984
			•
Social Security/Tax ID #	<u> </u>		
Additional debtors on attached UCC-E		(E ANIX	(Last Name First if a Person)
3. SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Hante First II a Colory
SouthTrsut Bank of Alabama,			
National Association P. O. Box 2554			
Birmingham, Al 35290		-	
Social Security/Tax ID #			
Additional secured parties on attached UCC-E			
025458			
5. This statement refers to original Financing Statement Shelby County Filed with	ent bearing File No.	Date Filed May 10th	90 19
6. Continuation. The original financing statement before 7. Termination. Secured Party no longer claims a set of the Secured Party's right under the property described in item 11 or to a Assignment. Whose name and address appears it of the Amendment of the Financing statement bearing file numbers.	ecurity interest under the tinancing statem e financing statement bearing file number : all of the property listed on this file, is assi	shown above to the gned to the assignee	
11.	<i>:</i> .		11A. Enter Coda(a) From
Loan paid	d out 8-31-91		Back of Form That Best Describes The Collateral Covered By This Filing:
			
Check X if covered: Products of Collateral are also	o covered.		
Check X if covered. Ell 7 roddolo of comments and and		A /	
Signature(s) of Debtor(s)		Signature (st of Secured Party (les)	
		Storature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item 9 i	is applicable)		Alabama/N. A.
Type Name of Individual or Business	OFFICER CORY ACKNOWN FORFACT	Type Name of Individual or Business STANDARD FORM — U	NIFORM COMMERCIAL CODE — FORM UCC-3
(1) FILING OFFICER COPY — ALPHABETICAL (3) FILING (2) FILING OFFICER COPY — NUMERICAL (4) FILE CO	OFFICER COPY — ACKNOWLEDGEMENT OPY — SECOND PARTY(S)	(5) FILE COPY DEBTOR(S) Approved by	y The Secretary of State of Alabama