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.

REORDER FROM
Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing Off filing pursuant to the Uniform Commercial Code.	icer for
Return copy or recorded original to	171	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	:
8769152	}		
MAGNOLIA FEDERAL BANK			
P.O. Box 1858			
Hattiesburg, MS 3940	13-1858		a
		·	
Pre-paid Acct. #	•		
2 Name and Address of Debtor	(Last Name First if a Person	• • • • • • • • • • • • • • • • • • •	OT 5
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Susan D. Hutton		(*3	の出意
2828 Adams St.		है। हो	Ore E
Helena, AL 3508	80	ी । - स्प्री	大き
		★	an E
Social Security/Tax ID #			× * 📆
2A. Name and Address of Debtor (IF ANY)	(Lest Name First if a Person	n) (#)	S O S
		E	
		g., m.d.	
		·	
Social Security / Tax (D #		FILED WITH:	
☐ Additional debtors on attached UCC-E			
3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
MAGNOLIA FEDERAL BANK	FOR SAVINGS		
P.O. Box 1858			
Hattiesburg, MS 3940)3-1858		
Social Security/Tax ID #			
☐ Additional secured parties on attached UCC-E			
	ect bearing File No 6001		
5. This statement refers to original Financing Statement Filed with Shelby C		Date Filed April 25	88
		ed Party, bearing file number shown above, is still effective.	
7. Termination. Secured Party no longer claims a se	ecurity interest under the linancing stat	tament bearing the file number shown above.	
_	s financing statement bearing file numb all of the property listed on this file, is a		
Assignment. whose name and address appears in	in Item 4.		
	mber shown above is amended as set, at described in item 11 from the financi		
Release number shown above.		<u> </u>	
11.			
		11/	A. 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	o covered.		
	····	MACHOLIA PEDEDAL BANK FOR	SAMMES
Clanaturals' of Debtouts		MAGNOLIA FEDERAL BANK FOR	2VAIIAQ2
Signature(a) of Debtor(s)		Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item 9 is	s applicable)	Secured Party(ies)	
Type Name of Individual or Puelson		Type Name of Individual or Business	
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY - ALPHABETICAL (4) FILING OFFICER C	OFFICER COPY-ACKNOWLEDGEMENT	STANDARD FORM — UNIFORM COI	
	PY - SECURED	(5) FILE COPY DEBTOR(S) Approved by The Secret	
NOTE THE STATE OF	一元 こうしょう かんき 機能を強制す	The State of the S	