## 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 5T.
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 Officer for filing pursuant to the Uniform Commercial Code.	
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
5भाग Atlantic Federal Fin 1775 R.W. Berends Dr		Date, time, repriner a rining Office	<b>A</b>
Grand Rapids, MI 49509		ַסָּ	SH W
		ָרָבָּי (2)	11.1 17.1 18.8 18.8 18.8
Pre-paid Acct. #	· <del>_</del>	Č.	h 1 (2% )
2. Name and Address of Debtor	(Last Name First if a Person)	Ţ	
Furline, James			
525 Fulton Springs			<b>D4</b> ≥ ≥
Alabaster, AL 35007			Instanta
Social Security/Tax ID #			' · · □
2A. Name and Address of Debtor (IF AN			
Layton, Brenda 525 Fulton Springs Alabaster, AL 35007			
Social Security/Tax ID #			
Additional debtors on attached UCC-E			
<ol> <li>SECURED PARTY (Last Name First if a Person)</li> </ol>	· · · · · · · · · · · · · · · · · · ·	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
Bedford Financial Corp. 31 Inverness Center Pkwy Birmingham, AL 35243		Atlantic Federal Financ 1775 R.W. Berends Dr. S Grand Rapids, MI 49509	
. Diriningilan, AL 33243		or arranged the results	
Social Security/Tax ID #		_	
☐ Additional secured parties on attached UCC-E	· · ·		
5. X This statement refers to original Financing Sta	atement bearing File No. 016317	<u> </u>	
	y Probate Judge	Date Filed Feb. 9	19 <u>87</u>
7.  Termination. Secured Party no longer claims 8.  Partial or The Secured Party's right under property described in item 11 or Assignment. Whose name and address appears.  9.  Amendment Financing statement bearing file.	s a security interest under the financing stateme or the financing statement bearing file number st or to all of the property listed on this file, is assign	hown above to the ned to the assignee in item 11.	
			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
			804
Check X if covered: Products of Collateral are	also covered.		
Cianatura/a) of Debter/-1			
Signature(s) of Debtor(s)		Signature(s) of Secured Burky(ses)	
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies)	
Type Name of Individual or Business	· · · · · · · · · · · · · · · · · · ·	Atlantic Federal Financ Type Name of Individual or Business	ıaı
THE PROPERTY OF THE PROPERTY O			