This FINANCING STATEMENT is presented to a Filling Surcer for filling 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 formerly known as; CITICORP ACCEPTANCE CO, INC PO BOX 790142 ST. LOUIS, MO 631790142 Pre-paid Acct. #___ (Last Name First if a Person) 2. Name and Address of Debtor JAMES D. ALEXANDER, ALEXANDER, \mathtt{JANELL} 1 BOX 115A calera, al 35040 Social Security / Tax (D #_ (Last Name First if a Person) (IF ANY) 2A. Name and Address of Deblor FILED WITH: Social Security/Tax ID #_____ Additional debtors on attached UCC-E (Last Name First if a Person) 3. NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person) (IF ANY) 4. ASSIGNEE OF SECURED PARTY CITICORP NATIONAL SERVICES, INC PO BOX 790142 ST. LOUIS, MO 631790142 Social Security/Tax ID #___ ☐ Additional secured parties on attached UCC-E 020715 5. This statement refers to original Financing Statement bearing File No. _____ Date Filed 7 – 21 . 19<u>88</u> SHELBY Filed with _ 6. Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7. Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. The Secured Party's right under the linancing statement bearing file number shown above to the 8. 🔲 Partial or 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 file 10. 🔲 Partial number shown above. Release 11. 11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling: 602 Check X if covered: Products of Collateral are also covered. CITICORP NATIONAL SERVICES, INC Signature(s) of Sicured Rarty(ies) Signature(s) of Debtor(s) Signature(s) of Secured Party(les) Signature(s) of Debtor(s) (necessary only if item 9 is applicable) Type Name of Individual or Business Type Name of Individual or Business STANDARD FORM - UNIFORM COMMERCIAL CODE - FORM UCC-3 (3) FILING OFFICER COPY-ACKNOWLEDGEMENT (1) FILING OFFICER COPY - ALPHABETICAL Approved by The Secretary of State of Alabama (5) FILE COPY DEBTOR(S) (2) FILING OFFICER COPY - NUMERICAL (4) FILE COPY - SECURED

STATE OF ALABAMA — UNIFORM COMMERCIAL CODE

Important: Read Instructions on Back Before Filling out Form

STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC.