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.

This FINANCING STATEMENT is presented to a Filing as defined in ALA CODE 7-9-105(n). No. of Additional Sheets Presented: This FINANCING STATEMENT is presented to a Filing filing pursuant to the Uniform Commercial Code. THIS SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office THIS SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF FILING OFFICER Date. Time, Number & Filing Office The SPACE FOR USE OF F	-16631 -16631 2TIFIED 6 PROBATE . 18
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Cedar Grove Park #37	
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Maylene, AL 35114	2 2 3 3
	had and
Social Security/Tax ID #	
Name and Address of Debtor (IF ANY) (Last Name First if a Person)	
Social Security / Tax ID #	
Additional debtors on attached UCC-E	
SECURED PARTY (Last Name First if a Person) 4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person
Southtrust Bank of AL, N.A.	(Dast Name t not mark order)
P. O. Box 2233	
Birmingham, AL 35201	
Dirintingnam, AD 33201	
Social Security/Tax ID #	
Additional secured parties on attached UCC-E	
© This statement of the training Statement Leaving Sile No. 027591	
Judge of Probate. Shelby County.	91
THEO WITH DETECTION	
Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.	
Partial or The Secured Party's right under the financing statement bearing file number shown above to the	
☐ Full property described in item 11 or to all of the property listed on this file, is assigned to the assignee Assignment whose name and address appears in item 4.	
Amendment Financing statement bearing file number shown above is amended as set forth in item 11.	
Partial Secured Party releases the collateral described in item 11 from the financing statement bearing file Release number shown above.	·
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,	11A. Enter Code(s) From
Paid out 6-3-93.	Back of Form That Best Describes The
•	Collateral Covered
	By This Filing:
	
Observation of the second of t	
Check X if covered: Products of Collateral are also covered.	
Signature(s) of Debtor(s) Signature(s) of Debtor(s)	*
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Signature(s) of Debtor(s) (necessary only if item 9 is applicable) Signature(s) of Debtor(s) (necessary only if item 9 is applicable) Southtrust Bank of AL. I	N.A.
Signature(s) of Debtor(s) (necessary only if item 9 is applicable) Signature(s) of Secured Party(ies) Southtrust Bank of AL, I Type Name of Individual or Business Type Name of Individual or Business	N.A