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

Registre, Inc.
514 PIERCE ST.
R.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 present filing pursuant to the Uniform Commercial		ficer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office		
Security Pacific Fina	ncial Services,	Bate, time, nomber at ming conce		
A Division of Bank Am				
P.O. Box 385000			.a	<u> A</u>
Birmingham, Al 35238			ŏ	
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Pre-paid Acct. #			i	1 Z =
Name and Address of Debtor	(Last Name First if a Person)	•	g,	경 개麗
mallagan Dander A			Ď	
Tolleson, Randy A.			- Francisco	ナメデジ
Route 1 Box 280-T			•	3
Columbiana, Al 35051			42	년 (M) 등등
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Shelby County			Bis Jame	
Social Security/Tax ID #	(Last Name First if a Person)			
	(Education From the Constitution of the Consti			
Tolleson, Flora L.				
Route 1 Box 280-T				
Columbiana, Al 35051	!			
Social Security/Tax ID #	·	FILED WITH:	·	<u> </u>
☐ Additional debtors on attached UCC-E				
3. NAME AND ADDRESS OF SECURED PARTY) (Las	st Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (II	F ANY)	(Last Name First if a Person)
Security Pacific Hous	ing Services			
P.O. Box 385000				
Birmingham, Al 35238				
Social Security/Tax ID #				
☐ Additional secured parties on attached UCC-E				
		023356	·	
5. This statement refers to original Financing Staten		Date Filed June 30		89
Filed with Shelby Co		<u> </u>	19	<u> </u>
6. Continuation. The original financing statement by 7. Termination. Secured Party no longer claims a			ve.	
8. Partial or The Secured Party's right under the	he financing statement bearing file number st	nown above to the		
☐ Full property described in item 11 or to Assignment, whose name and address appears	o all of the property listed on this file, is assign a in item 4.	ned to the assignee		
9. Amendment Financing statement bearing file n	umber shown above is amended as set forth			
	eral described in item 11 from the financing st	tatement bearing file		
Release number shown above.				
			11	A. Enter Code(s) From
			• '	Back of Form That Best Describes The
				Collateral Covered
•				By This Filing:
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Check X if covered. Products of Collateral are als	so covered Account #	530002657 ***	J	
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Signature(s) of Debtor(s)		Signature(s) of Secured Party(les)	. A. A	
Signature(s) of Debtor(s) (necessary only if item 9	is applicable)	Signature(s) of Secured Rarty(les)	N. 1. 2. 1. 1.	Carl 1122
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Type Name of Individual or Business	OFFICE CORV ADVIOUS FOOTHERS	Type Name-of Individual or Business STANDARD FORM	L UNIFORM CO	MMERCIAL CODE — FORM UCC-3
	OFFICER COPY-ACKNOWLEDGEMENT	/5) FILE CORVIDERTOR/S) STANDARD FORIV	ved by The Secre	etary of State of Alabama

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