## STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. FORM JCC-3

Important: Read Instructions on Back Before Filling out Form.

☐ The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is presented to a Filing filing pursuant to the Uniform Commercial Code.	Officer for
as defined in ALA CODE 7-9-105(n).  1. Return copy or recorded original to	Sheets Presented:	THIS SPACE FOR USE OF FILING OFFICER	•-
FIRST COMMERCIAL BANK		Date, Time, Number & Filing Office	
P. O. BOX 11746			• •
BIRMINGHAM, ALABAMA 35202-1746			
ATTN: DEDRA KING			
Pre-paid Acct.#			
Name and Address of Debtor     (Last Name First if a Person)			
WILLIAM R. TURNER AND DR. RUSSELL TURNER, AN ALABAMA GENERAL PARTNERSHIP 1432 WHITE CAP CIRCLE ALABASTER, ALABAMA 35007			AM CERT
Social Security/Tax ID #	(Last Name First if a Person)	<u>}</u>	
Social Security/Tax ID #		FILED WITH:	
☐ 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 (IF ANY)	(Last Name First if a Person)
FIRST COMMERCIAL BANK 2000 SOUTHBRIDGE PARKWAY BIRMINGHAM, ALABAMA 352 Social Security/Tax ID #			
Additional secured parties on attached UCC-E			
5. This statement refers to original Financing State	ment bearing File No021754		
Filed with <u>JUDGE OF PROBAT</u>	· · · · · · · · · · · · · · · · · · ·	Date Filed 12/08/ 19	<u> 88                                   </u>
<ul> <li>7.  Termination. Secured Party no longer claims a</li> <li>8.  Partial or The Secured Party's right under to property described in item 11 or to Assignment. Whose name and address appear</li> <li>9.  Amendment Financing statement bearing file remains and address.</li> </ul>	security interest under the financing statement he financing statement bearing file number so all of the property listed on this file, is assig	shown above to the great to the assignee in it item 11.	•
		16.00	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
			<del></del>
:			
Check X if covered: Products of Collateral are a	Iso covered.		
	<u>.</u>		elly
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)  LINDA BEASLEY	
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies)	
Type Name of Individual or Business		FTRST COMMERCIAL BANK Type Name of Individual or Business	