

1076

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 ST.
 P.O. BOX 218
 ANDOKA, MN. 55303
 (612) 421-1713

<input type="checkbox"/> The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).		No. of Additional Sheets Presented: <u>0</u>	This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.
1. Return copy or recorded original to Charlotte H. Fox Assistant Vice President Camp & Company P. O. Box 530667 Birmingham, AL 35253 Pre-paid Acct. # _____		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
2. Name and Address of Debtor (Last Name First if a Person) Equity Partners Joint Venture #2 Perimeter Park South Suite 450 Birmingham, AL 35243 Social Security/Tax ID # _____		<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> Inst # 1993-37008 11/19/1993-37008 03:34 PM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 001 MCD .00 </div>	
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) Social Security/Tax ID # _____			
<input type="checkbox"/> Additional debtors on attached UCC-E			
3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person) SMA Life Assurance Company, a Delaware Corporation 440 Lincoln Street Worcester, MA 01605 Social Security/Tax ID # _____			
<input type="checkbox"/> Additional secured parties on attached UCC-E		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
5. <input type="checkbox"/> This statement refers to original Financing Statement bearing File No. <u>019405</u> (cont'd. @ #1992-27203 on 11/17/92) Filed with <u>Judge of Probate, Shelby County</u> Date Filed <u>2/26</u> 19 <u>88</u>			
6. <input type="checkbox"/> Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective.			
7. <input checked="" type="checkbox"/> Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above.			
8. <input type="checkbox"/> Partial or <input type="checkbox"/> Full Assignment. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4.			
9. <input type="checkbox"/> Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.			
10. <input type="checkbox"/> Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.			

NOTE: The time for payment of the original indebtedness has not been extended, and the original term of the indebtedness was in excess of five years.

11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

500

Check X if covered: ☐ Products of Collateral are also covered.

Signature(s) of Debtor(s)	SMA Life Assurance Company
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	BY: <i>[Signature]</i> Assistant Treasurer
Type Name of Individual or Business	Type Name of Individual or Business