

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.

<input type="checkbox"/> The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.
1. Return copy or recorded original to <div style="text-align: center; font-size: 1.2em;">843358</div> Pre-paid Acct. # _____		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office <div style="transform: rotate(-90deg); font-weight: bold; font-size: 1.2em;">Inst # 1994-13833</div> <div style="transform: rotate(-90deg); font-weight: bold; font-size: 1.2em;">04/28/1994-13833</div> <div style="transform: rotate(-90deg); font-weight: bold; font-size: 1.2em;">09:57 AM CERTIFIED</div> <div style="transform: rotate(-90deg); font-weight: bold; font-size: 1.2em;">SHELBY COUNTY JUDGE OF PROBATE</div> <div style="transform: rotate(-90deg); font-weight: bold; font-size: 1.2em;">001 MCD 10.00</div>
2. Name and Address of Debtor (Last Name First if a Person) <div style="text-align: center;">Kennedy, Angie H. 401 Mound St. Washington, In. 47501</div> Social Security/Tax ID # _____		
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. SECURED PARTY (Last Name First if a Person) <div style="text-align: center;">STMS P.O. Box 2465 Birmingham, Al. 35201</div> Social Security/Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person) <div style="text-align: center;">STMS P.O. Box 2465 Birmingham, Al. 35201</div>
<input type="checkbox"/> Additional secured parties on attached UCC-E		
5. <input checked="" type="checkbox"/> This statement refers to original Financing Statement bearing File No. <u>16358</u> Filed with <u>Judge of Probate, Shelby County</u>		Date Filed <u>2-25</u> 19 <u>87</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 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.		
11.		
11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: <div style="text-align: right;"> _____ _____ _____ _____ _____ _____ _____ _____ </div>		
Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.		
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies) <u>8422-93</u>
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies)
Type Name of Individual or Business		Type Name of Individual or Business