## 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
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 presented by the Uniform Comments of the Uniform C	ented to a Filing Officer for rotal Code.
Return copy or recorded original to	······································	THIS SPACE FOR USE OF FILING OFFICER	
MAGNOLIA FEDERAL P.O. BOX 1858 HATTIESBURG, MS.		Date, Time, Number & Filing Office S	4011 1011 1011 1011 1011 1011 1011 1011
Pre-paid Acct. #  2. Name and Address of Debtor	(Last Name First if a Person)	-	
JOEL E. CUMBIE, 60 GREEN PKS PELHAM, AL. 3512	JR.		Inst * 1994 04/29/1994 04/29/1994 02:03 PM CE
Social Security/Tax ID #	(Last Name First if a Person)	-	
DEOBRAH CUMBIE 60 GREEN PK 5 PELHAM, AL. 3512	4		
Social Security/Tax ID #		FILED WITH:	9
		<b>-</b>	
Additional debtors on attached UCC-E     NAME AND ADDRESS OF SECURED PARTY) (Last I	Name First if a Person)	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First if a Person)
HATTIESBURG, MS.  Social Security/Tax ID #	39403-1858		-
<u> </u>		5983	
5. This statement refers to original Financing Statement Filed with		Date Filed 4 - 2 5	1992
6. Continuation. The original financing statement beto. 7. Termination. Secured Party no longer claims a secured Party's right under the property described in item 11 or to whose name and address appears. 9. Amendment Financing statement bearing file numbers.	ween the foregoing Debtor and Secured Facurity interest under the financing statement financing statement bearing file number stall of the property listed on this file, is assign item 4.  In item 4.  In the shown above is amended as set forthal described in item 11 from the financing statement.	ent bearing the file number shown above. shown above to the gned to the assignee the in item 11.	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling:
Check X if covered: ☐ Products of Collateral are also Signature(s) of Debtor(s)  Signature(s) of Debtor(s) (necessary only if item 9 in the content of the		Signature(s) of Secured Party(les)  Signature(s) of Secured Party(les)	
Type Name of Individual or Business		Type Name of Individual or Business	ORM — UNIFORM COMMERCIAL CODE — FORM UCC-3
(3) FILING OFFICER CODY ALPHARETICAL (3) FILING (	FEICER CORY, ACKNOWLEDGEMENT	STANDARD FO	NUM — OUR OURS COMMETCRE VODE — LOUIS DÓO-2