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

The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is prefiting pursuant to the Uniform Comm	resented to a Filing Officement of the Code.	per for
as defined in ALA CODE 7-9-105(n). Return copy or recorded original to	Sheets Presented:	THIS SPACE FOR USE OF FILING OFFICER		····
		Date, Time, Number & Filing Office		
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Pre-paid Acct. # Name and Address of Debtor	(Last Name First if a Person)		*	544
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Serial Sequestry/Tay ID #			μ̈́	C (1) 5
Social Security/Tax ID #	(Last Name First if a Person)		•	
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Social Security/Tax ID #		FILED WITH:	· · · · · · · · · · · · · · · · · · ·	
Additional debtors on attached UCC-E				
3. NAME AND ADDRESS OF SECURED PARTY) (Las	t Name First if a Person)	4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person)
HATTIESBURG, MS Social Security/Tax ID # Additional secured parties on attached UCC-E				
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5. This statement refers to original Financing Statement bearing File No. SHELBY CO. JUDGE OF PROBATE		#1992-6012 Date #iled 25 - 199	9_219	
8. Partial or The Secured Party's right under the property described in item 11 or to Assignment. Whose name and address appears 9. Amendment Financing statement bearing file not Secured Party releases the collate number shown above.	security interest under the financing statement he financing statement bearing file number sho all of the property listed on this file, is assigne	t bearing the file number shown above. own above to the ed to the assignee of item 11.	effective.	
11.			11,	A. Enter Code(s) From
T O A ST - ST O - O - O - O - O - O - O - O - O - O	52527			Back of Form That Best Describes The Collateral Covered
LOAN NO. 87-691			By This Filing:	
P.O. 6-9-1994				
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Check X if covered: Products of Collateral are also	so covered.		$dh \rightarrow$	17/27
			JXY C	JU/\/\
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies)	}	
Type Name of Individual or Business	<u></u>	Type Name of Individual or Busin	less	
	OFFICER CORY ACKNOW! FOGEMENT	STANDARD	FORM - UNIFORM CO	MMERCIAL CODE - FORM UCC-3