## 5783I

## 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

	**************************************		in acanastas to a Filler - C	Officer for
The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT if	Commercial Code	milicer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICE Date, Time, Number & Filing Office	CER	a
National Filing Service. Inc. 2 Corporate Place Suite 210 1501 42nd Street West Des Moines la 50266-1005			994-29718	994-29718 CERTIFIEI VIUGE OF PROBATE
Pre-paid Acct. # Name and Address of Debtor	(Last Name First if a Person)		<b>4</b>	大大の一番で
PEDEN, SCOTT T 1053 INDEPENDENCE CT ALBASTER AL 35007			Inst.	109/8 12:52 18:52
Social Security/Tax ID #				
PEDEN, JANET W 1053 INDEPENDENCE ALABASTER AL 35007	CT			
Social Security/Tax ID #		FILED WITH:		
☐ Additional debtors on attached UCC-E	. <u>.                                   </u>	4. ASSIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person)
JOHN DEERE CO PO BOX 65090 W DES MOINES IA 50 Social Security/Tax ID # OINES IA 50 Additional secured parties on attached UCC-E	0265			
5. This statement refers to original Financing Sta	atement bearing File No	024965		<u> </u>
Filed withSHELBY_CO		Date Filed3	<del>-22-90</del> 19	<del></del>
7. Termination. Secured Party no longer claim  8. Partial or The Secured Party's right under property described in item 11 or proper	nt between the foregoing Debtor and Secured is a security interest under the financing statement the financing statement bearing file number or to all of the property listed on this file, is assistant in item 4. The number shown above is amended as set for flateral described in item 11 from the financing	shown above to the igned to the assignee the in item 11.	still effective.	
11.		16	y.€°	11A. Enter Code(s) From
10-041-004-02549 <sup>6</sup>			Back of Form That Best Describes The Collateral Covered By This Filing:	
c-5145				
Check X if covered:   Products of Collateral are also covered.  Signature(s) of Debtor(s)		Ohn Occil Co A Bendles Clark Signature(s) of Secured Party(ies)		
Signature(s) of Debtor(s) (necessary only if ite	Signature(c) of Secured Party(ies)			
Type Name of Individual or Business		Type Name of Individual or 8	Business	
<u> </u>	ILING OFFICER CORY, ACKNOWLEDGEMENT	STAN	DARD FORM — UNIFORM	COMMERCIAL CODE - FORM UCC-3