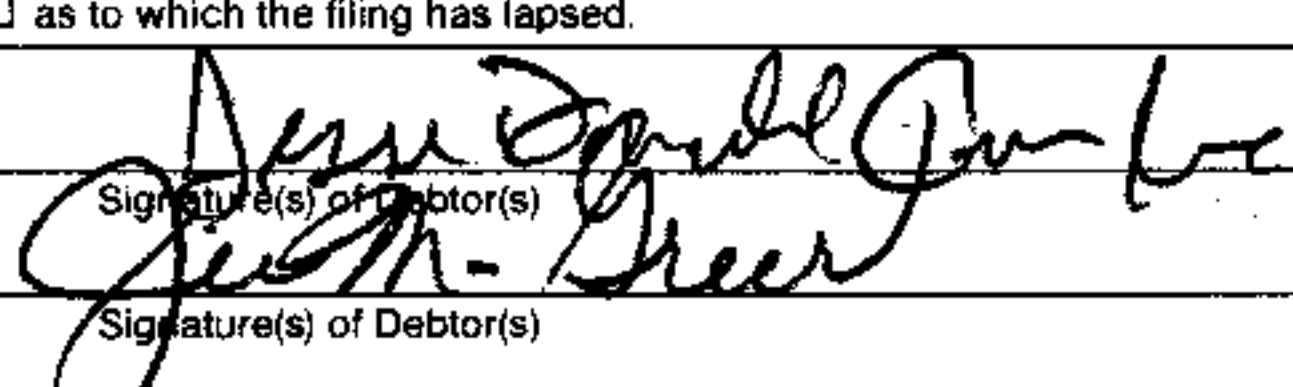
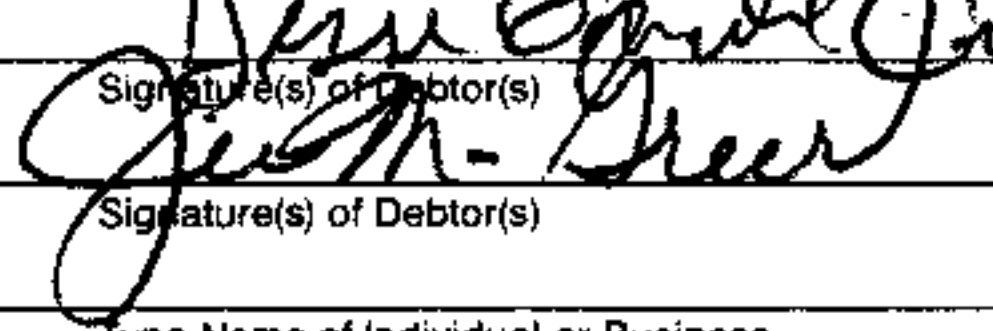
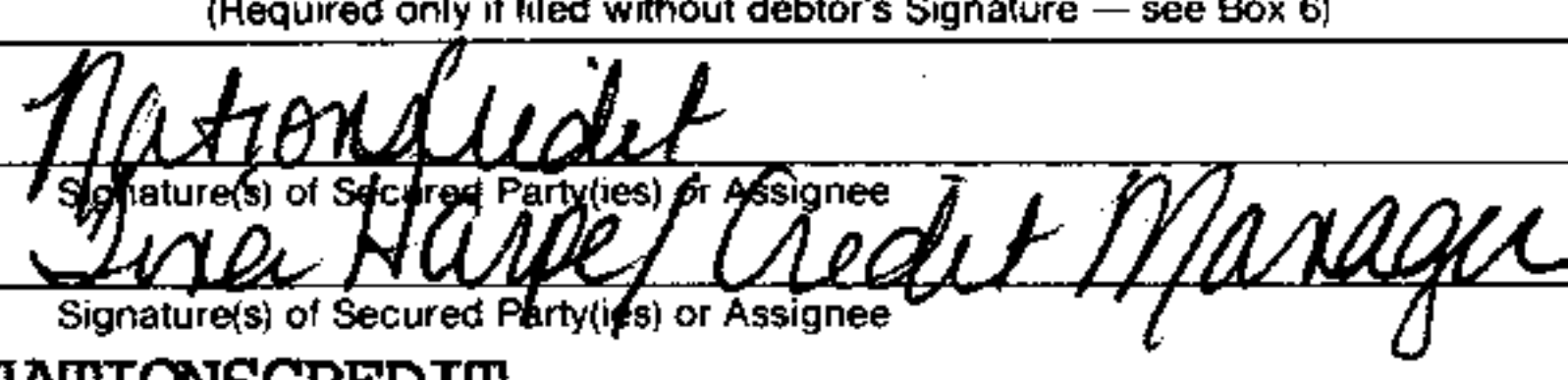
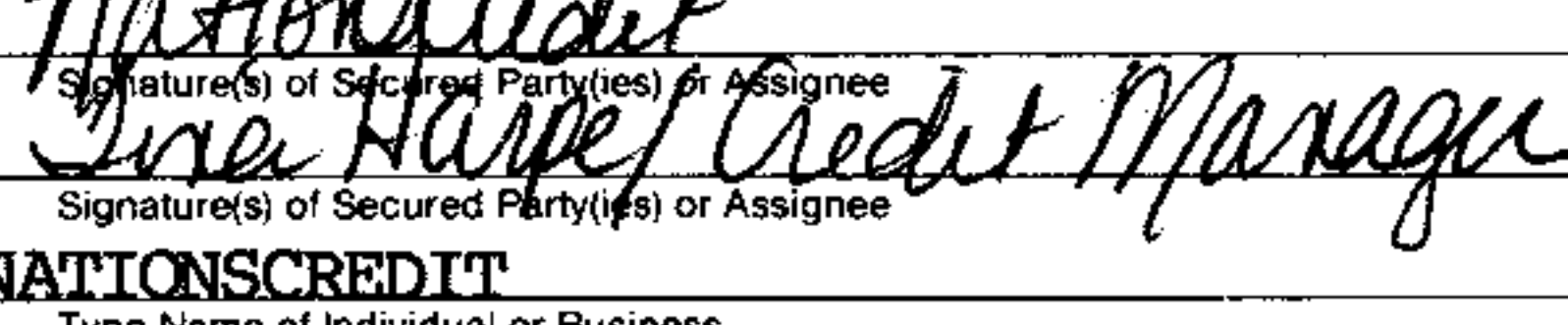


STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT FORM UCC-1 ALA.

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM
Registars, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

36.55

<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: NATIONSCREDIT 1000 HOLCOMB WOODS PKWY SUITE 240 ROSWELL GA 30076 Pre-paid Acct. # _____		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office <div style="text-align: center;"> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Inst # 1995-11246</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">05/01/1995-11246 10:37 AM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 36.55 001 MCD</p> </div>
2. Name and Address of Debtor (Last Name First if a Person) GREER JR., JESSE DONALD 1816 SOUTH POINT CIRCLE HOOVER AL 35244 SHELBY COUNTY, AL Social Security/Tax ID # _____		<p style="font-size: 2em; font-family: cursive;">C44162229-809</p>
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) GREER, JILL M 1816 SOUTH POINT CIRCLE HOOVER AL 35244 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) NATIONSCREDIT 1000 HOLCOMB WOODS PKWY SUITE 240 ROSWELL GA 30076 Social Security/Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person) _____
<input type="checkbox"/> Additional secured parties on attached UCC-E		
5. The Financing Statement Covers the Following Types (or items) of Property: <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <p>(1) NEW 1995 MAXUM 1800 SR BOWRIDER ID# USKC12MEA595</p> <p>(1) 1995 MERCUISER 4.3 LX ALPHA I I/O ID# OF436185</p> <p>(1) 1995 MAXUM ESCORT WT18PBB 405118BB4SR000226</p> <p>ACCESSORIES AND DEPTH FINDER</p> </div> <div style="width: 25%;"> <p>5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:</p> <p>6 0 0</p> </div> </div>		
Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.		
6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X if so) <input type="checkbox"/> already subject to a security interest in another jurisdiction when it was brought into this state. <input type="checkbox"/> already subject to a security interest in another jurisdiction when debtor's location changed to this state. <input type="checkbox"/> which is proceeds of the original collateral described above in which a security interest is perfected. <input type="checkbox"/> acquired after a change of name, identity or corporate structure of debtor <input type="checkbox"/> as to which the filing has lapsed.		7. Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$ 13652.98 Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 20.55 + 12.00 = 32.55 <input type="checkbox"/> This financing statement covers timber to be cut, crops, or fixtures and is to be cross indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 5)
Signature(s) of Debtor(s)  Signature(s) of Debtor(s)  Type Name of Individual or Business		Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6)  Signature(s) of Secured Party(ies) or Assignee  NATIONSCREDIT Type Name of Individual or Business