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 to a Filing Of filing pursuant to the Uniform Commercial Code.	fficer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	<u>a</u>
FIRST COMMERCIAL BANK		Date, Time, Number & Fixing Onice	は 回 正
P. O. BOX 11746		*	ST E
BIRMINGHAM, ALABAMA 35202-1746		ល់	
ATTN: VERNORA LEE		ழ்	
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Pre-paid Acct. #		#	でを重果
·	to animph	در	
NORTH SHELBY SHOPPING CENTER,		is \leq	17. 五景
AN ALABAMA GENERAL PARTNERSHIP			H # 35
2126 MORRIS AVENUE BIRMINGHAM, ALKABAMA 35203			
DIKMINGHAM, ALKADAMA	1 3,203		• • •
Social Security/Tax ID #	ANY) (Last Name First if a Person)		
		FILED WITH:	<u> </u>
Social Security/Tax ID #		JUDGE OF PROBATE OF SHE	LBY COUNTY
Additional debtors on attached UCC-E	M. (I and Marrier Eight & a Flamman)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
3. NAME AND ADDRESS OF SECURED PART	T) (Last Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Hame First in a Ferson)
FIRST COMMERCIAL BAN	ATTZ		
P. O. BOX 11746			
BIRMINGHAM, ALABAMA	35202		
Social Security/Tax ID #			
Additional secured parties on attached UCC-E			
5. This statement refers to original Financing	Statement bearing File No. <u>020534 AN</u>	11//116/	88
	ATE OF SHELBY COUNTY	Date Filed	
	ement between the foregoing Debtor and Secure aims a security interest under the financing state	d Party, bearing file number shown above, is still effective. Iment bearing the file number shown above.	
	under the financing statement bearing file number 11 or to all of the property listed on this file, is as:		
Assignment, whose name and address a	appears in item 4.	·	
	ng file number shown above is amended as set for a collateral described in item 11 from the financin		
Release number shown above.			
11.·		•	A. Estas Cada(a) Esam
	•	'	1A. Enter Code(s) From Back of Form That Best Describes The
	•		Collateral Covered By This Filling:
•			
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Check X if covered: Products of Collateral	are also covered.		
	· -		
Signature(s) of Debtor(s)		Signature(s) of Secured Farty(les) CHRIS L. HALEY	
Signature(s) of Debtor(s) (necessary only if	item 9 is applicable)	Signature(s) of Secured Party(ies) FIRST COMMERCIAL BANK	
Type Name of Individual or Business		Type Name of Individual or Business	.
	EILING OFFICED CODY ACKNOWLEDGEMENT	STANDARD FORM — UNIFORM CO	DMMERCIAL CODE - FORM LICC-3