☐ The Debtor is a transmitting utility	No. of Additional	This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.
as defined in ALA CODE 7-9-105(n).	Sheets Presented:	THIS SPACE FOR USE OF FILING OFFICER
Return copy or recorded original to:	.	Date, Time, Number & Filing Office
The Money Store Investment	Corporation	ก กูเมิ <i>พ</i>
Attn: Renee M. Petit 3301 "C" Street, Suite 301		
Sacramento, CA 95816		
Sacramenco, en son		村 村田 当
2. Name and Address of Debtor	(Last Name First if a Person)	
		ても
North Shelby Dental, P.C. 5420 Hwy 280 South, Suite	В	* 4 3 8
Birmingham AL XXXXX 35242		1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2
•		2 0 4 "
Social Security/Tax ID #		-
2A. Name and Address of Debtor (IF ANY)	(Last Name First if a Person)	
		FILED WITH: Shelby
Social Security/Tax ID #		Shelby Judge of Probate, XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Additional debtors on attached UCC-E		ii a Al a a Since if a Descripti
3. NAME AND ADDRESS OF SECURED PARTY (Last	Name First if a Person)	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
The Money Store Investment	t Corporation	
Attn: Loan Servicing P.O. Box 162247		
Sacramento CA 95816-2247	•	
Social Security/Tax ID #		
Additional secured parties on attached UCC-E	ge (or items) of Property:	
5. The Financing Statement Covers the Following Typ	es (or nema) or response.	together with all increases
All Fixtures, now owned,	or to be acquired,	together with all increases Interest extends to any and SA. Enter Code(s) From Back of Form That
to and replacements there all proceeds of the prope	rty described herei	n, including, but not Back of Form That Best Describes The
all proceeds of the prope	documents, insurar	ice proceeds, contract Collateral Covered By This Filing:
limited to chattel paper, documents, insurance proceeds, contract limited to chattel paper, documents, insurance proceeds, contract Sy This Filing:		
	cribed collateral.	
he	come fixtures on th	ne property described in the
attached exhibit "A" and	this financing stat	tement is to be filed for
record in the real estate	records.	
The name of the record ow	mer is: Shelby Med	dical Center
		ed in Jefferson County, Al. $$
Check X if covered: Products of Collateral are	e also covered. The to perfect a security interest in collate	7. Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$ 218.000.00
6. This statement is filed without the debtor's signature (check X, if so)		The initial indebtedness secured by this illiancing statement is vertex. Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ 0
Check X, if sold	isdiction when debtor's location changed	The second process of fixtures and is to be cross
1 - 16;		8. LiThis financing statement covers timber to be cut, crops, or fixtures and if debtor does not have 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)
which is proceeds of the original collateral described above in which a security interest is perfected. acquired after a change of name, identity or corporate structure of debtor.		Signature(s) of Secured Party(ies)
as to which the filing has lapsed.		(Bequired only if filed without debtor's Signature see Box 6)
DA TIME	n	Kum Hett
Of several of Debter(p)	<u> </u>	Signature(s) of Secured Party(ies) or Assignee By: Renee M. Petit, Loan Processor
By: Michael 1. Galdhel, 1705-100-1		Signature(s) of Secured Party(ies) or Assignee
Signature(s) of Debtor(s)		The Money Store Investment Corporation
North Shelby Dental, P.C. Type Name of Individual or Business		Type Name of Individual or Business STANDARD FORM LINIFORM COMMERCIAL CODE FORM U
ALCHARGO OFFICER CORY - ALPHARETICAL (3) FILM	NG OFFICER COPY - ACKNOWLEDGEMENT COPY - SECURED	(5) FILE COPY DEBTOR(S) Approved by The Secretary of State of Alabama

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