## STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

\$1.00 m

Important: Read Instructions on Back Before Filling out Form.

| The Debtor is a transmitting utility  | No. of Additional   | This FINANCING STATEMENT is presented to a Filing Officer 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   |                  | <del></del>   |
| Courtney Mason & Associa 1904 Indian Lake Drive, Birmingham, Alabama 352  Pre-paid Acct *   | Suite 100   | Date, Time, Number & Filing Office   | 996-28733        | 996-28733<br>CERTIFIED<br>JUNGE OF PROBATE<br>10.00                             |
| Ashtarani, Amir H. P. O. Box 2001 Alabaster, Alabama 3500  Social Security/Tax ID #   | · · · · · · · · · · · · · · · · · · ·   |  | Inst * 1         | 09 * 04 AM<br>94618Y COUNTY<br>001 ACD  |
| Social Security/Tax ID #  |   |  |                  |   |
| Additional debtors on attached UCC-E  | . <u></u>   | 4. ASSIGNEE OF SECURED PARTY (IF A   | LDA -            | Name First if a Person)   |
| Federally Chartered Savi<br>524 Lorna Square<br>Birmingham, Alabama 3521<br>Social Security/Tax 10 4  | L <b>6</b>  |  |                  |   |
| 5. This statement refers to original Financing State  | ement bearing File No. 1996-09  | /b/  | <u> </u>         | _   |
| 7. Termination. Secured Party no longer claims 8 8. Partial or The Secured Party's right under property described in item 11 or 1 10. Assignment whose name and address appears appears and address appears appears a partial Secured Party releases the collar number shown above. | security interest under the financing sta<br>the financing statement bearing file num<br>to all of the property listed on this file, is a | ber shown above to the assignee forth in item 11.  | ,                |   |
| Lot 64, according to the as recorded in Map Book County, Alabama; being   | c 21 page 84 in the   | ce Subdivision, Phase III, Probate Office of Shelby County, Alabama.   | Bar<br>Ber<br>Co | ter Code(s) From ck of Form That st Describes The Materal Covered This Filling: |
| Check X if covered: ☐ Products of Collateral are a  | elso covered.   |  |                  |   |
|   |   | Strace Chiell  |                  |   |
| •   | •   | MAC ITIMED C   |                  |   |
| Signature(s) of Debtor(s)   | ·   | Signature(s) of Secured Party(ies) Ste   | ven L. Co        | peland, V.P.  |
| Signature(s) of Debtor(s)  Signature(s) of Debtor(s) (necessary only if item  | 9 is applicable)  | Signature(s) of Secured Party(ies) Ste  Signature(s) of Secured Party(ies)  New South Federal  Type Name of Individual or Business |                  | <u>-</u>  |