STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, EXC. FORM UCC-3 20490 Important: Read Instructions on Back Before Filling out F The Debtor is a transmitting utility No. of Additional as defined in ALA CODE 7-9-105(n). Sheets Presented: 1. Return copy or recorded original to Date, Time, Number & Pline Cilla JAN 7 1997 AMSOUTH BANK OF AL PO BOX 1984 BHAM AL 35201 Pre-paid Acct. # 2. Name and Address of Debtor (Last Name First if a Person) RONALD T. RASP 35 LONGMEADOW MAYLENE AL 35114 Social Security/Tax ID # 2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person) STEPHANIE L RASP 35 LONGMEADOW RD MAYLENE AL 35114 FILED WITH: Social Security/Tax ID #______ SHELBY COUNTY ☐ Additional debtors on attached UCC-E 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) AMSOUTH BANK OF AL PO BOX 1984 BHAM AL 35201 Social Security/Tax ID #_ BR 12 -1023200077798 ☐ Additional secured parties on attached UCC-E 20877 5. This statement refers to original Financing Statement bearing File No. 7/01 19 94 JUDGE OF PROBATE 6. Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7. Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. ☐ Partial or The Secured Party's right under the financing statement bearing file number shown above to the ☐ Full property described in Item 11 or to all of the property listed on this file, is assigned to the assignee Assignment. whose name and address appears in item 4. 9. Amendment Financing statement bearing file number shown above is amended as set forth in item 11. 10. Partial Secured Party releases the collateral described in item 11 from the financing statement bearing file Release number shown above. 11A. Enter Code(s) From 1994 YAMAHA YFB250 VIN# JY44BDA06RA125866 Best Describes The Colleteral Covered By This Filling: Check X if covered: Products of Collateral are also covered. Signature(s) of Secured Party(iee) Signature(s) of Debtor(s) Signature(s) of Secured Party(ies) Signature(s) of Debtor(s) (necessary only if item 9 is applicable). AMSOUTH BANK OF AL Type Name of Individual or Business Type Name of Individual or Business

(1) FILING OFFICER COPY - ALPHABETICAL (2) FILING OFFICER COPY - NUMERICAL

11.

(3) FILING OFFICER COPY-ACKNOWLEDGEMENT (4) FILE COPY - SECURED

STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3 Approved by The Secretary of State of Alabama