

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

<input type="checkbox"/> The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented: <b>0</b>	This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.																																																																																																				
1. Return copy or recorded original to:		<p>THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number &amp; Filing Office</p> <div style="display: flex; justify-content: space-around; align-items: center;"><div style="writing-mode: vertical-rl; transform: rotate(180deg);">Inst # 1997-06685</div><div style="writing-mode: vertical-rl; transform: rotate(180deg);">03/04/1997-06685 12:37 PM CERTIFIED SHELBY COUNTY JUDGE OF PROBATE 001 HCD .00</div></div>																																																																																																				
2. Name and Address of Debtor (Last Name First if a Person)  <b>BURNS, JOSEPH N ROUTE 4 BOX 805 ALABASTER, AL 35007</b>																																																																																																						
Social Security / Tax ID # [REDACTED] (Last Name First if a Person)																																																																																																						
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)  <b>BURNS, MARIE N ROUTE 4 BOX 805 ALABASTER, AL 35007</b>																																																																																																						
Social Security / Tax ID # [REDACTED]		FILED WITH: <b>Shelby</b>																																																																																																				
<input type="checkbox"/> Additional debtors on attached <del>XXXX</del>		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)																																																																																																				
3. NAME AND ADDRESS OF SECURED PARTY  <b>BEDFORD FINANCIAL CORP 31 INVERNESS CNTR PKWY BIRMINGHAM, AL 35242</b>																																																																																																						
Social Security / Tax ID # _____																																																																																																						
<input type="checkbox"/> Additional secured parties on attached <del>XXXX</del>																																																																																																						
5. <input checked="" type="checkbox"/> This statement refers to original Financing Statement bearing File No. <b>019989</b> Filed with <b>Shelby</b> Date Filed <b>5/6/88</b>																																																																																																						
6. <input type="checkbox"/> Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7. <input checked="" type="checkbox"/> Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. 8. <input type="checkbox"/> Partial or <input type="checkbox"/> Full Assignment. The Secured Party's right under the financing statement bearing file number shown above to the property described in item 11 or to all of the property listed on this file, is assigned to the assignee whose name and address appears in item 4. 9. <input type="checkbox"/> Amendment. Financing statement bearing file number shown above is amended as set forth in item 11. 10. <input type="checkbox"/> Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.																																																																																																						
11. <b>Termination: The secured party no longer claims a security interest under the financing statement bearing the file number shown above.</b>																																																																																																						
11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>																																																																																																						
Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.																																																																																																						
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies) <b>THOMAS H. ADAMS, DOCUMENT REVIEW</b>																																																																																																				
Type Name of Individual or Business		Type Name of Individual or Business <b>BEDFORD FINANCIAL CORP</b>																																																																																																				