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

18957 Important: Read Instructions on Back Before Filling out Form.

☐ The Debtor is a transmitting utility	l No. of Additional		This FINANCING STATEMENT is pr	resented to a Filing Of	icer for
as defined in ALA CODE 7-9-105(n). Return copy or recorded original to	Sheets Presented:		filing pursuant to the Uniform Comr SPACE FOR USE OF FILING OFFICER	mercial Code.	
	3777		Time, Number & Filing Office		
FIRST COMMERICAL BA	NK.				
ATTN: ANITA WRIGHT		ļ		€	の日産
P.O. BOX 11746 BIRMINGHAM, AL. 35202-1746				7.	12 12 12 13 13 13 13 13 13 13 13 13 13 13 13 13
DIMINGHAM, AL. J.	202-1740	İ		44	7 5
Pre-paid Acct. #	_		*	1 1 1 k	が開発
Name and Address of Debtor	(Last Name First if a Pi	erson)		e O	0 0 ≥ 2
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SHOEMAKER, MARK S.		ļ			3 3 5
POST OFFICE BOX 200				اً في اُ	888
BIRMINGHAM, AL. 35	5216			, <u>"N</u>	10 to 25
				Ä	Ö
Social Security/Tax ID #	(NY) (Last Name First if a P	Person		. •	
ZA. Name and Address of Deblor (if: A	(Lastitation institution				
SHOEMAKER, LISA M.					
POST OFFICE BOX 200		į			
BIRMINGHAM, AL. 35	216				
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Contal Conveils (Tou ID #		FILED	WITH:		· · -
Social Security/Tax1D #	·····	I	JUDGE OF PROBATE-	SHELBY COU	NTY
Additional debtors on attached UCC-E NAME AND ADDRESS OF SECURED PARTY)	(Last Name First if a Person)	- A AS	SIGNEE OF SECURED PARTY	(IF ANY)	(Last Name First if a Person)
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FIRST COMMERICAL BA	ANK				
P.O. BOX 11746		!			
BIRMINGHAM, AL. 35	5202-1746				
Social Security/Tax ID #					
Additional secured parties on attached UCC-E					
	Statement hopping File No. 19	94-16189			
5. This statement refers to original Financing Filed with	PROBATE-SHELBY		Date Filed 5-19	19	4
6. Continuation. The original financing statem				effective.	
7. Termination. Secured Party no longer claim 8. Partial or The Secured Party's right un	ms a security interest under the financin der the financing statement bearing file				
☐ Full property described in item 11	or to all of the property listed on this file				
	file number shown above is amended a				
 Partial Secured Party releases the c Release number shown above. 	collateral described in item 11 from the fi	inancing statemer	nt bearing file		
11.					
				1	A. Enter Code(s) From Back of Form That
					Best Describes The Collateral Covered
					By This Filing:
					
					
					
	-				
Check X if covered: Products of Collateral a	are also covered.	· · -			
			FIRST COMMERICAL		
Signature(s) of Debtor(s)		_	Signature(s) of Secured Party(ies)	1 Phone	
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		BY:-	Signature(s) of Secured Party(ies)		
			LESSIE O. BRADY,		<u> IDENT</u>
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (3) F	ILING OFFICER COPY-ACKNOWLEDGEMENT		Type Name of Individual or Busini STANDARD	FORM - UNIFORM CO	OMMERCIAL CODE — FORM UCC
.,,	ILE COPY - SECURED		COPY DEBTOR(S)	Approved by The Secre	etary of State of Alabama