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

Important: Read Instructions on Back Before Filling out Form.

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

This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code. □ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n). No. of Additional Sheets Presented: THIS SPACE FOR USE OF FILING OFFICER 1. Return copy or recorded original to Date, Time, Number & Filing Office Alagasco Pre-paid Acct. # Name and Address of Debtor (Last Name First If a Person) Gaskins, Thomas R. 154 Willow Ridge Dr Indian Springs, Al 35124 Social Security/Tax ID #. 2A. Name and Address of Debtor IF ANY (Last Name First If a Person) Gaskins, Rita (same) Social Security/Tax ID #\_ ■ Additional debtors on ettached UCC-E 4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First If a Person) SECURED PARTY (Last Name First if a Person) Norrell Htg & Air Alagasco Social Security/Tax ID #\_\_\_ ■ Additional secured parties on attached UCC-E 07809 5x This statement refers to original Financing Statement bearing File No. \_ Shelby Co March 13 Date Filed. Flied with \_\_\_ 6. D Continuation. The original financing statement between the foregoing Debtor and Secured Party, bearing file number shown above, is still effective. 7.X. Termination. Secured Party no longer claims a security interest under the financing statement bearing the file number shown above. 6. Partial or The Secured Party's right under the financing statement bearing file number shown above to the O 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 tile number shown above is amended as set forth in item 11. Secured Party releases the collateral described in item 11 from the financing statement bearing file 10. Partial number shown above. 11. 11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling: 500 Check X if covered: Products of Colleteral are also covered. Signature(s) of Debtor(s) Signature(s) of Secured Party(les) Signature(s) of Debtor(s) (necessary only if item 9 is applicable) Alagasco Type Name of individual or Business Type Name of Individual or Business