## 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.

REGROER FROM

Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:		G STATEMENT is presented to a Carbo o the Uniform Commercial Code.	
Return copy or recorded original to		THIS SPACE FOR USE C Date, Time, Number & Fil	OF FILING OFFICER	
Union Planters Bank				
P.O. Box 1858				
Hattiesburg, MS 39403-	-1858			
	•			
Pre-paid Acct. #	<u> </u>			, 44 jil m
Name and Address of Debtor 4 3 7 7	(Last Name First if a Person)	- <b>-</b>	₩ ₩	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Bryan Lee Nelms			C	
Rt. 1 Box 75-A			9	
Columbiana, AL 35051				5 0 U W
				* 元を置
Social Security/Tax ID.#	NY) (Last Name First if a Person)			
2A. Name and Address of Debtor (IF A)	NY) (Last Name First ii a Ferson)			15.12.13.13.13.13.13.13.13.13.13.13.13.13.13.
Vicki Lynn Nelms				H D D
Same				
				<del></del> - ,
Social Security / Tax ID #		FILED WITH:	<u> </u>	<u> </u>
Additional debtors on attached UCC-E		<b>1</b>		
3. NAME AND ADDRESS OF SECURED PARTY)	(Last Name First if a Person)	4. ASSIGNEE OF SECU	JRED PARTY (IF ANY)	(Last Name First if a Person)
Union Planters BAnk, N	ational Association			
Successor by merger wi	th Magnolia Federal			
BAnk for Savings		-		
P.O. Box 1858				
Hattiesburg, MS 39403	-1.858			
☐ Additional secured parties on attached UCC-E				
5. This statement refers to original Financing S	Statement bearing File No. 019456			93
Filed withShelby Co		Date Fil		
8. Partial or The Secured Party's right un Property described in item 11 Assignment whose name and address ap Partial or The Secured Party's right un property described in item 11 Assignment whose name and address ap	ms a security interest under the financing states ider the financing statement bearing file number for to all of the property listed on this file, is ass	nent bearing the life flomber shown above to the signed to the assignee rth in item 11.	I SHOWII GDOTE:	remains effective ation statement
11.				11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
į.		•	•	
Check X if covered:  Products of Collateral	are also covered.		<u> </u>	
		Thian Plant	ers Bank, National As	sociation
Signature(s) of Debtor(s)	<u> </u>	Signature(s)	of Secured Party(ies)	70
Signature(s) of Debtor(s) (necessary only if it	item 9 is applicable)		of Secured Party(ies)	-Fact
Type Name of Individual or Business		Type Name o	of Individual or Business	M COMMERCIAL CODE — FORM UCC-3
(1) FILING OFFICER COPY - ALPHABETICAL (3)	FILING OFFICER COPY-ACKNOWLEDGEMENT		Assessed by The	Secretary of State of Alabama