

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

22842

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM
Registered, Inc.
224 MERCER ST.
P.O. BOX 218
ANNONCE, MOBILE 36602
(904) 483-1713

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).

No. of Additional Sheets Presented

This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code.

1. Return copy or recorded original to

WADE BOOTHE
2047 LITTLE WH CIR
PELHAM, AL 35124

Pre-paid Acct. #

2. Name and Address of Debtor

(Last Name First if a Person)

BOOTHE, WADE R
2047 LITTLE WH CR
PELHAM, AL 35124

Social Security/Tax ID #

2A. Name and Address of Debtor

(IF ANY)

(Last Name First if a Person)

Social Security/Tax ID #

☐ Additional debtors on attached UCC-E

3. NAME AND ADDRESS OF SECURED PARTY (Last Name First if a Person)

AGRICREDIT ACCEPTANCE COMPANY
PO BOX 7902
DES MOINES, IA 50322-9402

Social Security/Tax ID #

☐ Additional secured parties on attached UCC-E

5. ☐ This statement refers to original Financing Statement bearing File No. 1997-26115

Filed with SHELBY

Date Filed 8/15/97

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.

8. ☐ Partial or 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. ☐ Amendment. Financing statement bearing file number shown above is amended as set forth in item 11.

10. ☐ Partial Release. Secured Party releases the collateral described in item 11 from the financing statement bearing file number shown above.

11.

11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:

Check X if covered: ☐ Products of Collateral are also covered.

Signature(s) of Debtor(s)

Signature(s) of Debtor(s) (necessary only if item 9 is applicable)

Type Name of Individual or Business

Devin Smith
Signature(s) of Secured Party(ies)
SECURITY ADMINISTRATOR
Signature(s) of Secured Party(ies)
AGRICREDIT ACCEPTANCE COMPANY
Type Name of Individual or Business