

UCC-01

## State of Mississippi UCC-1 Financing Statement

|  | Name first for indiv                                  | iduals)                                 | Book & Page:  | File   | Chancery Clerk of Filed with: SHELBY County,  Mississippi. ALAS.                              |                |                |                                       |
|--|---|---|---|--|---|----------------|----------------|---------------------------------------|
| ROWN   | LELAND  | <u></u>                                 | A<br>Middle Nam   | Last Name  | First 1   | Name           | ·· <b>-</b> ·· | Middle N                              |
| ast Name   | st Name First Name Middle Na                          |   |   |  | 1 1104 1  |                |                | į                                     |
| 0 MOUNTAIN LAUR  | EL COURT  | <del></del>                             |   | Mailing Address  | <u> </u>  |                |                | ——                                    |
| ailing Address   | . ·   | :                                       | •   | Mailing Address  | :   | •              |                | I                                     |
| RMINGHAM   | AL  |   | 35244   |  |   | 10.01          | -              |                                       |
| ty   | State   | Cty Cd                                  | ZIP   | City   | State   | Cty Cd         | ZIP            | <br>                                  |
|  |   | Transmittir                             | ng Utility  |  |   | ·              | •              |                                       |
| x ID/SSN   |   | 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |   | Tax ID/SSN   |   |                |                |                                       |
| . Secured Party  | (Last Name first fo                                   | r individ                               | uals)   | 3. Assignee (Last N  | lame first for inc  | lividuals)     | )              | 1                                     |
| NK OF LUCEDALE   | Main Office   |   |   | Dusiness Name  |   |                |                |                                       |
| Susiness Name  |   |   |   | Business Name  |   |                |                | ľ                                     |
| 82 MAIN STREET P.  | O. BOX 647  | <u>.</u>                                |   |  |   | <del> </del>   | <u> </u>       |                                       |
| ailing Address   |   |   |   | Mailing Address  | i   | 1              |                | 1                                     |
| TOEDAS E   | MS  | 20                                      | 39452   |  |   |                |                |                                       |
| Ity  | State   | Cty Cd                                  | <del> </del>  | City   | State   | Cty Cd         | ZIP            | ļ                                     |
| <u>.</u>   | . [   |   |   |  |   |                |                |                                       |
| TD (DD)  |   |   |   | Tax ID/SSN   | <del></del>   |                | <del></del>    |                                       |
| ax ID/SSN  | statement covers th                                   | - fallarri                              | lua tunna (on ita   | • •  | •   |                | •              |                                       |
|  |   | الدادة المم                             | ampies dismoss of the   | colleteral   |   |                |                |                                       |
|  | es not authorize debtor to                            |   |   |  | interest in colle   | torol          | <del>.</del>   |                                       |
| 5. Check if this st  | t to a security interest in                           | hout the another just                   | Debtor's signation when it was                                | ure to perfect a security  | interest in cona  | teiai          |                |                                       |
| changed to thi   | s state   |   |   |  |   | as             | Office Us      | e Only                                |
| changed to thi which is proce was perfected  | eds if the security interes                           | t in the ori                            | ginal collateral  | where the original fill if lien to secure paym (effective 1 y  | ling has lapsed<br>nent of royalty procee   | as             | Office Us      | e Only                                |
| changed to thi which is proce was perfected acquired after the Debtor  | eds if the security interes                           | t in the ori                            | ginal collateral orate structure of                           | where the original fill if lien to secure paym   | ling has lapsed<br>nent of royalty procee<br>year)  | as             | Office Us      | e Only                                |
| changed to thi which is proce was perfected acquired after the Debtor  | eds if the security interest a change of name, identi | t in the ori                            | ginal collateral orate structure of                           | where the original fill if lien to secure paym (effective 1 y  | ling has lapsed nent of royalty procee (ear)  eets attached:                                  | as             | Office Us      | e Only                                |
| changed to this which is process was perfected acquired after the Debtor  6. Check if covere   | a change of name, identi                              | t in the ori                            | ginal collateral orate structure of                           | where the original fill if lien to secure paym (effective 1 )  Number of additional should be the secure of additional should be sank of Lucedale Mark of Luced | ling has lapsed nent of royalty procee year)  eets attached:  lain Office                     | as             |                | ·····                                 |
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| changed to this which is process was perfected acquired after the Debtor  6. Check if covere   | a change of name, identi                              | t in the ori                            | ginal collateral orate structure of $\frac{3}{6}$             | where the original fill  if lien to secure paym (effective 1 y  Number of additional sho BANK OF LUCEDALE M  BY: Signature of Secured Paym Signature of Secured Paym Required only with file   | ling has lapsed nent of royalty procee year)  eets attached: lain Office arty KATHRYN D. Ki   | ds EEL, ASST V | /P/COMPL       | ·····                                 |
| changed to this which is process was perfected acquired after the Debtor  6. Check if covered acquired after the Debtor  Signature of Debtor | a change of name, identi                              | t in the ori                            | ginal collateral orate structure of $\frac{3}{6}/\frac{4}{9}$ | where the original fill  if lien to secure paym (effective 1 y  Number of additional she  BANK OF LUCEDALE M  BY:  Signature of Secured Paym  Signature of S | ling has lapsed nent of royalty procee (ear)  eets attached: lain Office arty KATHRYN D. Kl   | ds EEL, ASST V | /P/COMPL       | · · · · · · · · · · · · · · · · · · · |