STATE OF ALABAMA - UNIFORM COMMERCIAL CODE - FINANCING STATEMENT FORM UCC-1 ALA.

Important: Read Instructions on Back Before Filling out Form.

The Debtor is a transmitting utility as defined in ALA CODE 7.g.10.5(n)	No. of Additional Sheets Presented	The FINANCING STATEMENT is presented to a Filing Of filing pursuant to the Uniform Commercial Code	
Return copy or record original to:	· · · · · · · · · · · · · · · · · · ·	THIS SPACE FOR USE OF FILING OFFICER Date: Time, Number & Filing Office	
Equity One Inc 2090 Columbiana R Birmingham, AL 3			**
		85 ***	# 교 품
ne-paid Acct. # Name and Address of Debtor	(Last Name first if a Person)	S. C.	SOCE TFIE PROBATE
Anne R. Koenig 602 Hillsboro ln. Helena, AL 35080		866	AM CERT
ocial Security/Tax #D * Name and Address of Debtor (IF ANY)	(Last Name First if a Person)		12/2 12/2 09:12 98:48
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			= max are to the second
ocial Security. Tax iD #	· ·		
SECURED PARTY (Name and Address of Secured Party)	<u></u> -	4. ASSIGNEE OF SECURED PARTY (Name and Address of Assignee)	
265 Riverchase Pkw Birmingham, AL 35		2090 Columbiana Rd Ste Birmingham, AL 35216	4000
Additional secured parties on attached UCC-E			
The Financing Statement Covers the Following Types (or i	tems) of Property:		
Install Siding on	home	5.	A Back of Form That Best Describes The Collateral Covered By This Filling:
			_
Check X if covered: Products of Collateral are also cover		7. Complete only when filling with the Judge of Probate:	4345.00
6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so) I already subject to a security interest in another jurisdiction when it was brought into this state.		The initial indebtedness secured by this financing statement is \$.	6.60
already subject to a security interest in another jurisdiction when debtor's location changed to this state. It which is proceeds of the original collateral described above in which a security interest is		Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$	
perfected.] acquired after a change of name, identity or corporate stri] as to which the filling has lapsed.		Signature(s) of Secured Party(ies (Required only if filed with out debtor's Signature	s) ine/ see/box 6)
Signature(s) of Debtor(s) (Arme R. Koemig	<u> </u>	Signatupe(s) of Secured Party(ies) or Assignee	they contra
Signature(s) of Debtor(s)	<u>u</u>	Signature(s) of Secured Party(ies) or Assignee	
Type Name of individual or Business	<u> </u>	Type Name of individual or business	
O SILING OFFICED CORV. AI PHARETHICAI (3) FILIN	G OFFICER COPY - ACKNOWLEDGEMENT	STANDARD FORM - UNIFOR	M COMMERCIAL CODE - FORM UCC