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 7-9-105(n). | No. of Additional Sheets Presented: | This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code. | |
|--|--|--|-------------|
| Return copy or recorded original to: | <u>*</u> | THIS SPACE FOR USE OF FILING OFFICER | |
| Regions Bank | | Date, Time, Number & Filing Office | |
| 225 West College Street | | | |
| Columbiana, Al. 35051 | | | |
| | | | |
| | | | |
| Pre-paid Acct. # | | | |
| 2. Name and Address of Debtor | (Last Name First if a Person) | | |
| DUNNAWAY, TIM WADE | | | |
| 85 OLD LOCKERY RD | | | ı |
| WILSONVILLE, AL 35186-0000 | | | |
| · . | | 98 98 P. P. S. | 8 |
| | | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 5 ¥Ž |
| Social Security / Tax ID # | | | <u> </u> |
| 2A. Name and Address of Debtor (IF ANY) | (Last Name First if a Person) | ရှိ ရှိပ | |
| | | Na Na Zi | 産る |
| | | | 夏云 - |
| | | Óũ | <u>ج</u> ک |
| • | | in in its angle in the initial initial in the initial in | 累 |
| | | | 1 |
| Social Security / Tax ID # | | | |
| Additional debtors on attached UCC-E | <u> </u> | | |
| 3. SECURED PARTY (Last Name First if a Person) | | 4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Per | son) |
| Regions Bank | | | |
| 225 West College Street | | | |
| Columbiana, AL 35051 | | | |
| | | | |
| Social Security / Tax ID # | <u> </u> | | |
| Additional secured parties on attached UCC-E | | | |
| 5. The Financing Statement Covers the Following Types | (or items) of Property: | W. FINN R-40 STRAW BLOWER W/20 HP | |
| VALUED ENGINE (CVID MOUNT) MODEL | RAD SERBKKZAS: Whether bily | ty: FINN B-40 STRAW BLOWER W/20 HP of the foregoing is owned now or acquired 5A. Enter Code(s) From | |
| | Of DOCINES anotheritedus base sen | ANY OF THE TOTEGOING; OR FOUNTIES UP ONLY ARMS | |
| relating to any of the foregoing; all proceed and accounts proceeds) | eds relating to any of the forego | Collateral Covered | |
| and accounts brocosco | | By This Filing: | |
| | | | |
| | | — — — — — — — — — — — — — — — — — — — | |
| | | | |
| | | · — — — | <u> </u> |
| | | | |
| and the second s | en accorded | | <u> </u> |
| 6. This statement is filed without the debtor's signature to | | 7. Complete only when filling with the Judge of Probate: (1491806 |) |
| collateral (check X if so) | - | The initial indebtedness secured by this financing statement is Mortgage tax due {15c/per \$100.00 or fraction thereof} \$ | _ |
| already subject to a security interest in another jurisdic state. | | 9. This financing statement covers timber to be cut, crops, or fixtures and is to be cro | SS |
| already subject to a security interest in another jurisdic | | indexed in the real estate mortgage records (Describe real estate and if debtor does not have an interest of record, give name of record owner in Box 5) | Į. |
| which is proceeds of the original collateral described at is perfected. | | | |
| acquired after a change of name, identity or corporate | structure of debtor. | Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature - see Box 6) | |
| as to which the filing has lapsed. | | Bill I love | |
| Signature(s) of Debtor(e) Wune | | Signature of Secured Partylies) or Assignes | |
| Signaturales of Debtories 7 in wob | <u> </u> | Signature(s) of Secured Party(ics) or Assignee | |
| TIM WARE DUNNAWAY BUSINGS TOM W | aba D | Regions Bank of Individual or Business | |
| (3) FULLING OFFICER COPY - ALPHABETICAL | ILING OFFICER COPY - ACKNOWLEDGEME | STANDARD FORM - UNIFORM COMMERCIAL CODE - FORM UCC FILE COPY - DEBTOR(S) Approved by The Secretary of State of Alabama | - -1 |