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

59007

Important: Read Instructions on Back Before Filling out Form.

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

☐ The Debtor is a transmitting ⊎tility as defined in ALA COD€ 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is p filing pursuant to the Uniform Com	resented to a Filing Officer for mercial Code.
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICES Date, Time, Number & Filing Office	·
FIRST SAVINGS BANK PO BOX 1959 ARLINGTON TX 76004-	FSB -1959		
			.
Pre-paid Acct. ** Name and Address of Debtor NAME X XXXXXX X X X X X X X X X X X X X X	(Last Name First if a Person) BWK INC 5492 HWY 280 E BIRMINGHAM AL 35242		2000-18216 2000-18216 4 CERTIFIE ITY JUDGE OF PROBATE ITY JUDGE OF PROBATE
Social Security/Tax ID #	NY) (Last Name First if a Person)		Inst # 20 06/02/20 01:19 PM SMELBY COUNTY SMELBY COUNTY
Social Security/Tax tD #		AL-Shelby County	
Additional debtors on attached UCC-E NAME AND ADDRESS OF SECURED PARTY)		4 NAME AND ADDRESS OF ASSIGNEE OF SEC	URED PARTY (F ANY) (Last Name First if a Person)
388 Greenwich Street, New York, NY 10013 Social Security/Tax ID #	TILII FIOOI	301 South Cente Arlington, Texa	
☐ Additional secured parties on attached UCC-E		i	
5 X This statement refers to original Financing S Filed with AL-Shelby Count		Date Filed	
6 Continuation. The original financing statement of Termination Secured Party no longer claim 8 Partial or The Secured Party's right und property described in item 11 Assignment, whose name and address apply 19 Amendment Financing statement bearing 6	ent between the foregoing Debtor and Secured P is a security interest under the financing statement fer the financing statement bearing file number s or to all of the property listed on this file, is assig	arty, bearing file number shown above, is still intibearing the file number shown above hown above to the ned to the assignee.	effective
" All collateral per or	iginal financing state	ement is being assign	ed. 11A Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
Check X if covered: Products of Collateral ar	e also covered	Transo-	1)
Signature(s) of Debtor(s)	· · · · · · · · · · · · · · · · · · · 	Signature(s) of Secured Party(ies)	
Signature(s) of Debtor(s) (necessary only if ite	m 9 is applicable)	Signature(s) of Secured Party(les) Salomon Brothers F	_
Type Name of Individual or Business		Type Name of Individual or Busine	ess
(1) FILING OFFICER COPY - ALPHABETICAL (3) FIL (2) FILING OFFICER COPY - NUMERICAL (4) FIL	ING OFFICER COPY - ACKNOWLEDGEMENT E COPY - SECURED PARTY	STANDARD (5) FILE COPY DEBTOR(S)	FORM — UNIFORM COMMERCIAL CODE — FORM UCC Approved by The Secretary of State of Alabama