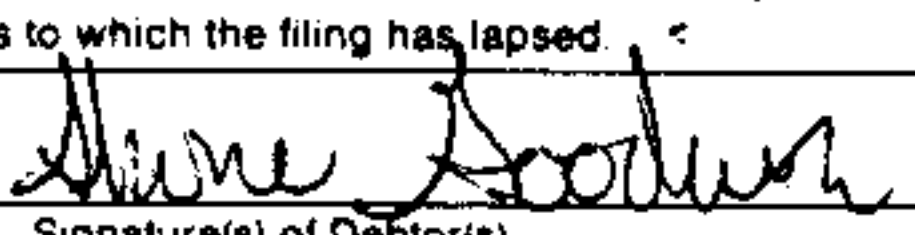
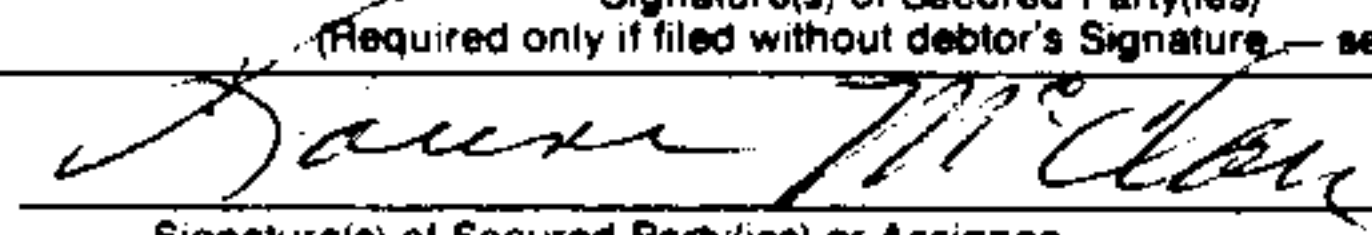


STATE OF ALABAMA — UNIFORM COMMERCIAL CODE — FINANCING STATEMENT  
FORM UCC-1 ALA.

**Important: Read Instructions on Back Before Filling out Form.**

PULL-A-PART BUSINESS FORMS  
14214 INDIANA AVE., RIVERDALE, IL 60827  
PHONE 1-800-441-1020

<input type="checkbox"/> 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:  AMERICAN GENERAL FINANCE P.O. BOX 866 BESSEMER, ALA 35021  Pre-paid Acct. # _____		<p>THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number &amp; Filing Office</p> <div style="display: flex; justify-content: space-around; align-items: center;"><div style="writing-mode: vertical-rl; transform: rotate(180deg);">FILED # 2000-32427</div><div style="writing-mode: vertical-rl; transform: rotate(180deg);">09/18/2000-32427</div><div style="writing-mode: vertical-rl; transform: rotate(180deg);">09:34 AM CERTIFIED</div><div style="writing-mode: vertical-rl; transform: rotate(180deg);">SHELBY COUNTY JUDGE OF PROBATE</div><div style="writing-mode: vertical-rl; transform: rotate(180deg);">16.35</div><div style="writing-mode: vertical-rl; transform: rotate(180deg);">001 AMB</div></div>	
2. Name and Address of Debtor (Last Name First if a Person)  JEFFERY S. GOODWIN 7707 WINDHAM CIRCLE HELENA, AL 35080  Social Security/Tax ID # _____			
2A. Name and Address of Debtor (IF ANY) (Last Name First if a Person)        Social Security/Tax ID # _____			
<input type="checkbox"/> Additional debtors on attached UCC-E			
3. SECURED PARTY (Last Name First if a Person)  AMERICAN GENERAL FINANCE P.O. BOX 866 BESSEMER, ALA 35021  Social Security/Tax ID # _____		4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)	
<input type="checkbox"/> Additional secured parties on attached UCC-E		5A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing: 600 _____ _____ _____ _____ _____ _____ _____ _____	
5. The Financing Statement Covers the Following Types (or items) of Property:  BOX FLEX EXCERISE EQUIPMENT			
6. This statement is filed without the debtor's signature to perfect a security interest in collateral (check X, if so) <input type="checkbox"/> already subject to a security interest in another jurisdiction when it was brought into this state. <input type="checkbox"/> already subject to a security interest in another jurisdiction when debtor's location changed to this state. <input type="checkbox"/> which is proceeds of the original collateral described above in which a security interest is perfected. <input type="checkbox"/> acquired after a change of name, identity or corporate structure of debtor <input type="checkbox"/> as to which the filing has lapsed.		7. Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$ <u>860.35</u> Mortgage tax due (15¢ per \$100.00 or fraction thereof) \$ <u>1.35</u> <u>11.00</u>  8. <input type="checkbox"/> This financing statement covers timber to be cut, crops, or fixtures and is to be cross 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)	
Check X if covered: <input type="checkbox"/> Products of Collateral are also covered.		Signature(s) of Secured Party(ies) (Required only if filed without debtor's Signature — see Box 6)	
Signature(s) of Debtor(s) 		Signature(s) of Secured Party(ies) or Assignee 	
Signature(s) of Debtor(s)		Signature(s) of Secured Party(ies) or Assignee AMERICAN GENERAL FINANCE	
Type Name of Individual or Business		Type Name of Individual or Business	