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

48522 Important: Read Instructions on Back Before Filling out Form.

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

☐ 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 pursuant to the Uniform Commercial Code	
Return copy or recorded original to	<u> </u>	THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
First Commercial E P O Box 11746 Birmingham, Alaban			
Pre-paid Acct. #		Ç	9 H H
2. Name and Address of Debtor	(Last Name First if a Person)	7.5(in Les
Simian Land, LLC 12 Office Park Cin Birmingham, Alaban			AM CERT
Social Security/Tax ID #	(Last Name First if a Person)		10/3 10:43 10:43
Social Security/Tax ID #		FILED WITH:	····································
☐ Additional debtors on attached UCC-E		Judge of Probate	
3. NAME AND ADDRESS OF SECURED PARTY	(Last Name First if a Person)	4 NAME AND ADDRESS OF ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First # a Person)
First Commercial 800 Shades Creek Birmingham, Alabar Attn: Paul M. Scha	Parkway na 35209 abacker		
Additional secured parties on attached UCC-E		<u></u>	. <u></u>
5. This statement refers to original Financing :	Statement bearing File No	1999-50029	
Filed with Judge of Prol	ate	Date Filed	<u> </u>
7. Termination. Secured Party no longer claim 8. Partial or The Secured Party's right under property described in item 11 Assignment. Whose name and address appropriate Partial Secured Party releases the control of the Party releases the Control	ms a security interest under the financing statement der the financing statement bearing file number short to all of the property listed on this file, is assign	nown above to the ned to the assignee in item 11.	
11.			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
Termination of \$1999	-50029		
Check X if covered: Products of Collateral a	re also covered.		1/1/1/-
Signature(s) of Debtor(s)		First Commercial Bank Signerous of Secured Party(189)	
Signature(s) of Debtor(s) (necessary only if it	em 9 is applicable)	By Signature(s) of Secured Party(ies)	
Type Name of Individual or Business	·· ···································	Type Name of Individual of Business	

(4) FILING OFFICER CORY, ALBUMPETICAL IN FILING OFFICER CORY, ADVINOUS FROM HENT