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

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 filling pursuant to the Uniform C	s presented to a Filing Officer for ommercial Cede.
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFI Date, Time, Number & Filing Office	DER
Alabama Power Comp 600 North 18th Stre			
Birmingham, Alabama 35291			
Diringiam, Tidodin	.u		
Pre-paid Acct. #	d and bloom of the bit of Control		9 11 12
	(Last Name First if a Person)		
Iris F. Smitherman			No Fig.
221 Springbrook Lar Montevallo, AL 3511			
MOUGE ACTIO! MP 2211			
Sociel Security/Tax ID #			
2A. Name and Address of Debtor	(IF ANY) (Last Name First if a Person)		
		•	Inst 102/ 088:
Social Security/Tax ID #			•
☐ Additional debtors on attached UCC-E	· · · · · · · · · · · · · · · · · · ·	<u></u>	
3. SECURED PARTY (Last Name First if a Per	raon)	4. ASSIGNEE OF SECURED PARTY	(IF ANY) (Last Name First If a Person)
Alabama Power Com	pany		(" >"") (Cast Hattle First if a Person)
600 North 18th Stre	et		
Birmingham, Alabam	a 35291		
Social Security/Tax ID #			
Additional secured parties on attached UCC			
5. This statement refers to original Financi	sing Statement bearing File No	-17661	
Filed with Judge of Pro	bate Shelby County	May 030th	200020
8. Partial or The Secured Party no longer The Secured Party is right property described in iter Assignment. Whose name and address 9. Amendment Financing statement bear	stement between the foregoing Debtor and Secured Piclaims a security interest under the financing statement under the financing statement bearing file number similar to all of the property listed on this file, is assigns appears in item 4. Iring file number shown above is amended as set forth the collateral described in item 11 from the financing similar collateral described in item 11 from	ont bearing the file number shown above. shown above to the med to the assignee in item 11.	effective.
			11A. Enter Code(s) From Back of Form That Best Describes The Colleteral Covered By This Filling:
			
		-	
Check X if covered: Products of Collater	ral are also covered.	- \A A ++	1/
Signature(s) of Debtor(s)	· 	Signature(s) of Secured Party(ies	Mey
Signature(s) of Debtor(s) (necessary only	if item 9 is applicable)	Signature(s) of Secured Party(les Alabama Power	
Type Name of Individual or Business (1) FILING OFFICER COPY — ALPHABETICAL (1)	(3) FILING OFFICER COPY — ACKNOWI FOREMENT	Type Name of Individual or Busin	6\$\$