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

07079

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM

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

STANDARD FORM - UNIFORM COMMERCIAL CODE - FORM UCC-3

☐ The Debtor is a transmitting utility	No of Additional		This FINANCING STATEMENT is presente filing pursuant to the Uniform Commercia	ed to a Filing Officer for I Code
as defined in ALA CODE 7-9-105(n).	Sheets Presented	THIS	SPACE FOR USE OF FILING OFFICER	
CLAUDE MCCAIN MONCUS, CORLEY, MONCUS & WARD, P.O. BOX 69807 BIRMINGHAM AL 35259-08	P.C.	Date	Time. Number & Filing Office	PAGRE PORTE
Pre-paid Acct. #				
2. Name and Address of Debtor	(Last Name F	erst if a Person)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
HOLIFIELD, VINCENT 124 DOGWOOD TRAIL MONTEVALLO, AL 35115				3,02/201 3,02/201 3,02/201 3,02/201
Social Security/Tax ID #		5:		F O CH
HOLIFIELD, JACQUELYN 124 DOGWOOD TRAIL MONTEVALLO, AL 35115	(Last Name	First if a Person)		.à
Spaint Security / Tax ID #		FILE	D WITH:	
Social Security/Tax ID #	<u></u>		JUDGE OF PROBATE	
Additional debtors on attached UCC-E 3. NAME AND ADDRESS OF SECURED PARTY) (L	ast Name First if a Person)	4 !	NAME AND ADDRESS OF ASSIGNEE OF SECURED	PARTY (IF ANY) (Last Name First if a Person)
P.O. BOX 11746 BIRMINGHAM AL 35202-1 Social Security/Tax ID # Additional secured parties on attached UCC-E	746			
5 This statement refers to original Financing Sta	atement bearing File No	1999-16587	0/ 00 0	
Filed with JUDGE OF PE	ROBATE		Date Filed04-20-9	
8. Partial or The Secured Party's right under property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, which is a property described in item 11 or Assignment, which is a property described in item 11 or Assignment, which is a property described in item 11 or Assignment, which is a property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, which is a property described in item 11 or Assignment, which is a property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or Assignment, which is a property described in item 11 or Assignment, which is a property described in item 11 or Assignment, whose name and address appropriate property described in item 11 or	s a security interest under the the financing statement but to all of the property listed ears in item 4. It number shown above is a	he financing statement be learing file number shown d on this file, is assigned to amended as set forth in ite	alove to the other shown above. o the assignee em 11.	CIVE.
TERMINATE # 1999-1658	87			11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
Check X if covered: Products of Collateral an	e also covered	<u></u>		<u> </u>
				// / / / / / / / / / / / / / / / / / / /
Signature(s) of Debtor(s)		· · · · · · · · · · · · · · · · · · ·	Signature(s) of Secured Party(ies)	Milles
Signature(s) of Debtor(s) (necessary only if ite	m 9 is applicable)		Signature(s) of Secured Partylies FIRST COMMERCIAL BAN	K
Type Name of Individual or Business			Type Name of Individual of Business	