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.

 			99/32-1061
☐ 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 (filing pursuant to the Uniform Commercial Code.	Officer for
Return copy or recorded original to		THIS SPACE FOR USE OF FILING OFFICER	
Brenda Broome Compass Bank 15 South 20th Street Birmingham, Alabama 35233		Date, Time, Number & Filing Office	
Pre-paid Acct. # 2. Name and Address of Debtor North Shelby Partners 1109 Townhouse Road Helena, Alabama 35080	(Last Name First if a Person)	2001-40990	CERTIFIED JUNE OF PROBATE 10.00
Social Security/Tax ID #	(Last Name First if a Person)		12:48 PM SELBY COUNTY SELBY COUNTY
Social Security/Tax ID #	·		
Additional debtors on attached UCC-E SECURED PARTY (Last Name First if a Person)		4. ASSIGNEE OF SECURED PARTY (IF ANY)	(Last Name First if a Person)
Compass Bank 15 South 20th Street Birmingham, Alabama 35233 Social Security/Tax ID # Additional secured parties on attached UCC-E			
5. This statement refers to original Financing Statement	ate, Shelby County	98-35138 Date Filed9-9-9819	
8. Partial or The Secured Party's right under the property described in item 11 or to whose name and address appears Financing statement bearing file number shown above. 10. Partial Secured Party releases the collater number shown above. 11. Lot 63, according to the Sin Map Book 25, Page 83 A,	e financing statement bearing file number shall of the property listed on this file, is assign in item 4. Umber shown above is amended as set fortheal described in item 11 from the financing statement of the Probability Statement of the Probabilit	nt bearing the file number shown above. nown above to the med to the assignee in item 11. Italian to bearing file the control of the control	1A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered
Alabama; being situated in			By This Filing:
Check X if covered: Products of Collateral are also Signature(s) of Debtor(s)	o covered.	Signatura(s) & Saburad Partu(ins) TOIT	NT NE NEWTONIS
Signature(s) of Debtor(s) Signature(s) of Debtor(s) (necessary only if item 9 is	s applicable)	Signature(s) of Secured Party(ies) Signature(s) of Secured Party(ies) COMPASS BANK	N M. MCQUEEN
Type Name of Individual or Business	· · · · · · · · · · · · · · · · · · ·	Type Name of Individual or Business	
(1) FILING OFFICER COPY — ALPHABETICAL (3) FILING (OFFICER COPY — ACKNOWLEDGEMENT	STANDARD FORM — UNIFORM CO	OMMERCIAL CODE - FORM LICC.