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

09867

(2) FILING OFFICER COPY - NUMERICAL

and the Medical Carteria and Artist and the Medical Artist (Artist Section 2015). The section of the Artist Artist (Artist Artist Artis

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

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is presente filing pursuant to the Uniform Commercial	d to a Filing Officer for
Pre-paid Acct #		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office 19205-1003 19205-1003 29205-1003 39205-1003	
BEAVER CREEK PRESERVE, LLP C/O HARBAR CONSTRUCTION COMPANY 5502 CALDWELL MILL ROAD BIRMINGHAM AL 35243 Social Security/Tax ID #			11/21/20 11:53 FM SELW COUNTY JU
Social Security/Tax ID # Additional debtors on attached UCC-E		FILED WITH:	
FIRST COMMERCIAL BANK P.O. BOX 11746 BIRMINGHAM AL 35202-1 Social Security/Tax ID #	Χ.	JUDGE OF PROBATE SHELBY 4. NAME AND ADDRESS OF ASSIGNEE OF SECURED PAR	
Additional secured parties on attached UCC-E 5 XX This statement refers to original Financing Statement Filed with	·	Date Filed 12-30-97	
8. Partial or The Secured Party's right under property described in item 11 or Assignment, whose name and address appears 9. Amendment Financing statement bearing file	r the financing statement bearing file number sho to all of the property listed on this file, is assign:	rty, bearing file number shown above, is still effective. It bearing the file number shown above. It bear to the assignee.	
TERMINATE # 1997-4226	57		11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filing:
Check X if covered: Products of Collateral are a	Iso covered.		
Signature(s) of Debtor(s)	······································	Signature(s) of Secured Party(les)	
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies) FIRST COMMERCIAL BANK	
Type Name of Individual or Business (1) FILING OFFICER COPY - ALPHABETICAL (3) FILING (2) FILING OFFICER COPY - NUMBER COPY	OFFICER COPY - ACKNOWLEDGEMENT	Type Name of Individual or Business	

STANDARD FORM