



OLLOW INSTRUCTIONS (from A. NAME & PHONE OF CONTA	فالتراج والمستوال والمراج				
Richard C. Fruechtenich	t - (205) 868-3610				
B. SEND ACKNOWLEDGMENT	ΓΤΟ: (Name and Address)				
Protective Life Ins	surance Company				
P. O. Box 2606					
Birmingham, Alab					
ATTN: Investmen	nt Department				
		THE ABOVE SE	وربه نووسکو پر بساور	R FILING OFFICE USE	برسا برسال برسال برسال
a. INITIAL FINANCING STATEMEN 2001-01352 - filed 1/1	IT FILE # 2/2001 - Shelby County, Alabama		1	FINANCING STATEMENT e filed [for record] (or recor	
		terminated with respect to security interest(s) of the		AL ESTATE RECORDS. Iv authorizing this Terminati	ion Statement
		e with respect to security interest(s) of the Secure			
	eriod provided by applicable law.		or arry action		
. ASSIGNMENT (full or parti	al): Give name of assignee in item 7a or 7b and a	ddress of assignee in item 7c; and also give name of	of assignor in	item 9.	
. AMENDMENT (PARTY INFO	DRMATION): This Amendment affects Deb	tor <u>or</u> Secured Party of record. Check only	one of these	lwo boxes.	
	ree boxes <u>and</u> provide appropriate information in ite			ND	
name (if name change) in item	ss: Give current record name in item 6a or 6b; also 1 7a or 7b and/or new address (if address change)	give new DELETE name: Give record nar to be deleted in item 6a or 6b.		DD name: Complete item 7a m 7c; also complete items 7	a or 75, and also 7d-7g (if applicable
CURRENT RECORD INFORMA 6a. ORGANIZATION'S NAME	ATION:	· · · · · · · · · · · · · · · · · · ·		_	
į	L.L.C., an Alabama limited liabilit	ty company			
R 6b. INDIVIDUAL'S LAST NAME	•	FIRST NAME	MIDDLE	NAME	SUFFIX
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