## NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

IMPORTANT — READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM — DO NOT DETACH STUB 084022

|  |  | 20021004000485870 F<br>Shelby Cnty Judge of<br>10/04/2002 15:15:00 | 9 1/1 28.00<br>f Probate 0                                       |
|--|--|--|--|
| UCC FINANCING STATEMENT AMENDMEN   | <b>3 7</b>   |  |  |
| FOLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]   |  |  |  |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address)  |  |  |  |
| First Commercial Bank PO box 11746 Birmingham, AL 35282  |  |  |  |
|  | THE ABOVE S  | SPACE IS FOR FILING OF   | FICE LISE ONLY   |
| 1s. INITIAL FINANCING STATEMENT FILE #   |  | 1b. This FINANCING ST  | TATEMENT AMENDMENT IS  |
| 2002-2329 Shelby County  |  | REAL ESTATE REC  |  |
| <ol> <li>TERMINATION: Effectiveness of the Financing Statement identified above is</li> <li>CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.</li> </ol>   |  |  |  |
| 4.   ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a  | address of assignee in item 7c; and also give name | e of assignor in item 9.   |  |
| Also check one of the following three boxes and provide appropriate information in its CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change 6a. ORGANIZATION'S NAME  BW & MMC, LLC | so give new TDELETE name: Give record n            | ADD name: Comp<br>item 7c; also comp                               | lete item 7a or 7b, and also<br>lete items 7d-7a (if applicable) |
| OR 6b. INDIVIDUAL'S LAST NAME  | FIRST NAME   | MIDDLE NAME  | SUFFIX   |
| 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME   |  |  |  |
| 7b. INDIVIDUAL'S LAST NAME   | FIRST NAME   | MIDDLE NAME  | SUFFIX   |
| 7c. MAILING ADDRESS  | CITY   | STATE POSTAL COD   | COUNTRY  |
| 7d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION   | 7f. JURISDICTION OF ORGANIZATION                   | 7g. ORGANIZATIONAL II  | ) #, if any  |
| DEBTOR  3. AMENDMENT (COLLATERAL CHANGE): check only one box.  |  |  | NON  |
| Describe collateral X deleted or added, or give entire restated collater   | ral description, or describe collateralassign      | ed.  |  |
| Partial Release: Lots 554, 555<br>Fifth Sector, as recorded in Ma<br>Shelby County, Alabama.   |  | •  |  |
| Fifth Sector, as recorded in Ma  | NDMENT (name of assignor, if this is an Assign     | ment). If this is an Amendment                                     | fice of authorized by a Debtor which                             |
| Fifth Sector, as recorded in Ma Shelby County, Alabama.  P. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME adds collateral or adds the authorizing Debtor, or if this is a Termination authorized    Pa. ORGANIZATION'S NAME   | NDMENT (name of assignor, if this is an Assign     | ment). If this is an Amendment                                     | fice of  |
| Fifth Sector, as recorded in Ma Shelby County, Alabama.  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME adds collateral or adds the authorizing Debtor, or if this is a Termination authorized   | NDMENT (name of assignor, if this is an Assign     | ment). If this is an Amendment                                     | fice of  |