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20021122000584940 Pg 1/3 30.00 Shelby Crty Judge of Probate AL

20021122000584940 Pg 1/3 30.00 Shelby Cnty Judge of Probate, AL 11/22/2002 13:06:00 FILED/CERTIFIED

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY				
A. NAME & PHONE OF CONTACT AT FILER [optional]				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
				
LexisNexis Document Solutions				
PO Box 2969				
Springfield, IL 62708				
1				
	THE ABOVE SP	ACE IS FO	R FILING OFFICE USI	EONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or				
1a. ORGANIZATION'S NAME				
RTM, Alabama, Inc.				
OR 1b. INDIVIDUAL'S LAST NAME	TEIDOT MANE	Lubbur		
TID. HADIVIDOAL S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
		İ		
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
5449 Barfield Road	Atlanta	GA	30328	USA
1d. TAX ID # SSN OR EIN ADD'NL INFO RE 1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	10 OB(CANDZATIONAL ID # #	<u></u>
ORGANIZATION CORP	AL	Jig. Okt	SANIZATIONAL ID #, if an	у
DEBTOR				NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one del	otor name (2a or 2b) - do not abbreviate or combine	names		
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
2c. MAILING ADDRESS	LOITY.			
20. HEALING ADDINESS	CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID # SSN OR EIN ADD'NL INFO RE 2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG	SANIZATIONAL ID #, if any	 -
ORGANIZATION DEBTOR	• •	1		
				NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGN 3a. ORGANIZATION'S NAME	IOR S/P) - insert only one secured party name (3a	or 3b)		
GE Capital Franchise Finance Corporat				-
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	SUFFIX	
3c. MAILING ADDRESS The Perimeter Center,	CITY	STATE	POSTAL CODE	COUNTRY
17207 North Perimeter Drive	Scottsdale	ΑZ	85255	USA
4. This FINANCING STATEMENT covers the following collateral:				
This financing statement relates to a property of the statement and the statement of the st	revious financing state	ment #	1996-22707,	filed on
07/15/1996, filed in AL-Shelby County, a	as to the same collater	al, wh	ich has laps	sed.

See Attached Schedule "A"

5. ALTERNATIVE DESIGNATION if applicable: LESS	SEE/LESSOR CONSIGNER	CONSIGNOR BAILEE/BAILOR	SELLER/BUYER	AG LIEN	NON-UC	C FILING
6. This FINANCING STATEMENT is to be filed (for reconstruction of the control of	ord) (or records) in the REAL [if applicable]	7. Check to REQUEST SEARCH REPORT [ADDITIONAL FEE]	T(S) on Debtor(s) [optional]	All Debtors	Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA AL-Shelby County		2055	. ()	6924	12	34

NAME OF FIRST DERTOR (1a or 1b) ON RELATED FINA	ANCING STATEMENT					
9a. ORGANIZATION'S NA	 -	·					
RTM, Alabama,							
9b. INDIVIDUAL'S LAST NA	ME FIRST NAM	ME	MIDDLE NAME, SUFFIX				
MISCELLANEOUS: AL-S	Shelby County						
				THE ABOVE	SPACE	IS FOR FILING OFFICE	USE ONLY
. ADDITIONAL DEBTOR 11a. ORGANIZATION'S NAM		ME - insert only <u>one</u> na	ame (11a or 11b) - do not abbrev	iate or combine nam	es		
11b. INDIVIDUAL'S LAST N	AME		FIRST NAME		MIDDLE	IAME	SUFFIX
MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
ļ	ADD'NL INFO RE 11e. TYPE CORGANIZATION DEBTOR	OF ORGANIZATION	11f. JURISDICTION OF ORGA	NIZATION	11g. OR0	SANIZATIONAL ID #, if any	NO
ADDITIONAL SECU 12a. ORGANIZATION'S NA		ASSIGNOR S/P'S	NAME - insert only <u>one</u> name ((12a or 12b)	<u> </u>		
12b. INDIVIDUAL'S LAST N	AME		FIRST NAME	MIDDLE NAME		SUFFIX	
c. MAILING ADDRESS		· · · · · · · · · · · · · · · · · · ·	CITY	······································	STATE	POSTAL CODE	COUNTRY
. This FINANCING STATEME collateral, or is filed as a	fixture filing.		16. Additional collateral descrip	otion:			
ee attached fo	r legal descri	ption					
5. Name and address of a REC (if Debtor does not have a ге	ORD OWNER of above-describe cord interest):	ed real estate					
			17. Check only if applicable an			anorty hold in to set	Decedent's Est
						operty held in trust or	Decedent's Est
			18. Check only if applicable and Debtor is a TRANSMITTING		х.		

Schedule "A"

All of the furniture, machinery, fixtures, and equipment of the Debtor, whether now owned or hereafter acquired wherever located, including but not limited to the addresses listed below, together with all accessions, parts, replacements, substitutions, accessories, attachments and appurtenances in any way used with, attached to or installed in any of the foregoing, all proceeds of the foregoing, including, without limitation, proceeds of insurance policies, and all documents, instruments and agreements relating to the foregoing.

Location of Collateral

Franchise:

Arby's

Address:

652 First Street N Alabaster, AL 35007

2240 McFarland Blvd. Tuscalossa, AL 35401

Inst * 1996-22707

O7/15/1996-22707
11:59 AM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
286.85