



India Andrews   B. SEND ACKNOWLEDGMENT TO: (Name and Address)	UCC FINANCING STATEMENT AMENDMEN' FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
E. SEND ACKNOWLEDGMENT TO: (Name and Address)    Flerrings Bank   P.O. Box 4389   Birmingham, Ala. 35243	A. NAME & PHONE OF CONTACT AT FILER [optional]			
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1s. INPITIAL, FINANCING STATEMENT FILE # Instrument # 2009-21656 - filed 6/29/90  Instrument # 2009-21656 - filed				
P.O. Box 43889 Birmingham, Ala. 35243  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1s. INITIAL FURNICING STATEMENT PACE ONLY  1s. INITIAL FURNICING STATEMENT PACE ONLY  1s. INITIAL FURNICING STATEMENT PACEOUS TO THE INITIAL STATEMENT PACEOUS TO THE Process of the Process o	F——			
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13_INITIAL PRINACING STATEMENT FILE # Instrument # 2000-21656 - filed 6/29/00 2.				
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3. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional periodical properties by applicable law.  4. ASSIGNATION (for law ratio) representations the properties of the secure of the additional period province of the security properties. The properties of the security interest (for law ratio) representations of the security Party of record. Check only gain of these two boses. Also check gain of the following three boses again provide appropriate information in terms is entirely in provided to provide appropriate information in terms in entirely of the security of record. Check only gain of these two boses.  Also check gain of the Schooling three boses again provide appropriate information in terms in entirely of the surface.  PCHAMOTE CERTOR INFORMATION:  So CURRENT RECORD INFORMATION:  So DEGRANIZATION SAME  PCHAMOTION SAME  PCHAMOTION SAME  PCHAMOTION FOR THE POSTAL CODE  COUNTRY  72. CHANGED (NEW) OR ADDED INFORMATION:  73. ORGANIZATION'S NAME  SUFFIX  TO INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  SUFFIX  STATE  MIDDLE NAME  SUFFIX  STATE  POSTAL CODE  COUNTRY  74. AMENDMENT (COLLATERAL CHANGE): chack only gain pox.  DISTOR  NOTIFICATION OF ORGANIZATION  PROPRIED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (mane of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor while adds collateral in adds the authorizing Debtor, or if this is a Terrange of Debtor, check here and or enter name of DEBTOR authorizing bis Amendment.  Heritage Bank  PCHART OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (mane of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor while adds collateral or adds the authorizing Debtor, or if this is a Terrange of DEBTOR authoriting bis Amendment.  PARTY OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (mane of assignor, if this is an Authoriting bis Amendment.)  PROPRIED	Instrument # 2000-21656 - filed 6/29/00			
4. ASSIGNMENT (full or partial). Give name of assignee in liter? so 77b and address of the following three boxes again provide appropriate information in liters 6 and/or 7c.  Also Check only one of the following three boxes again provide appropriate information in liters 6 and/or 7c.  CHANGE can avoid address (the cuter to expendent appropriate information in liters 6 and/or 7c.  CHANGE CRORD INFORMATION:  Ga ORGANIZATION SNAME  Pelham Office Enterprises LLC  So Individual SLAST NAME  FIRST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  To CHANGED (NEW) OR ADDED INFORMATION:  To ORGANIZATION SNAME  FIRST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  TO AND INDIVIDUAL SLAST NAME  FIRST NAME  FIRST NAME  FIRST NAME  AMENDMENT (COLLATERAL CHANGE): check only gain box.  Describe collateral deleted or Maded, or give entire prestated collateral description, or describe collateral material addressing this is an Assignment). If this is an Amendment authorized by a Debtor whice address collateral or adds the suthorizing this Amendment.  By NAME or SECURED PARTY or RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor whice adds collateral or adds the suthorizing this Amendment.  By NAME or SECURED PARTY or RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor whice adds collateral or adds the suthorizing this Amendment.  By ORGANIZATION'S NAME  Herritage Bank	2. TERMINATION: Effectiveness of the Financing Statement identified above is	terminated with respect to security interest(s) of the	Secured Party authorizing this Ter	mination Statement.
5. AMENDMENT (PARTY INFORMATION): This Amendment affects	<b>3</b>	ve with respect to security interest(s) of the Secure	d Party authorizing this Continuati	ion Statement is
Also check tags of the following three boxes approvide appropriate information in items 6 and/or 7.    CHANDE name and/or address. (if address of the and/or new boxes of the and/or new boxes of the and/or new address (if address change) in item 7c.    CHANDE name change) in item 7a or 7b and/or new address (if address change) in item 7c.    CHANDE CORD IN FORMATION:   CAUREENT RECORD IN FORMATION:   To CHANDED (NEW) OR ADDED INFORMATION:   To CHANDED (NEW) OR ADDED INFORMATION:	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 o	f assignor in item 9.	
CLANAGE name and one address: Give current record name in term fall or 6b; also give new name of name and name thange in term fall or 76 and fall or name of name thange in term fall or 76 and fall or name of name thange in term fall or 76 and fall or name of name thange in term fall or 76 and fall or name of name thange in term fall or 76.   DELETE name: Give record name   DELE	5. AMENDMENT (PARTY INFORMATION): This Amendment affects Det	otor or Secured Party of record. Check only o	ne of these two boxes.	
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6. CURRENT RECORD INFORMATION:  58 ORGANIZATIONS NAME Pollam Office Enterprises LLC  OR  70 INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX  70 INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX  70 INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX  70 INDIVIDUAL'S LAST NAME FORGANIZATION FORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION FORGANIZATION FORGANIZATION ORGANIZATION ORGA	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)	o give new DELETE name: Give record name in item 7c. Lobe deleted in item 6a or 6b.		
Pelham Office Enterprises LLC  OR 65 INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  75. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  To. MAILING ADDRESS  CITY  STATE  POSTAL CODE  COUNTRY  To. TAX ID #: SSN OR EIN   ADDL INFO RE   72. TYPE OF ORGANIZATION   71. JURISDICTION OF ORGANIZATION   72. ORGANIZATIONAL ID #, if any   NAME  B. AMENDMENT (COLLATERAL CHANGE); check only age box.  Describe collateral   deleted or   added, or give entire   restated collateral description, or describe collateral   assigned.  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination suthorized by a Debtor, check here   and enter name of DEBTOR authorizing this Amendment.  So DRAMIZATION NAME  Heritage Bank				
OR 66 INDIVIDUAL'S LAST NAME   FIRST NAME   MIDDLE NAME   SUFFIX    7. CHANGED (NEW) OR ADDED INFORMATION:  7. CHANGED (NEW) OR ADDED INFORMATION:  7. ROGANIZATIÓN'S NAME   FIRST NAME   MIDDLE NAME   SUFFIX    7. INDIVIDUAL'S LAST NAME   FIRST NAME   MIDDLE NAME   SUFFIX    7. INDIVIDUAL'S LAST NAME   FIRST NAME   MIDDLE NAME   SUFFIX    7. INDIVIDUAL'S LAST NAME   FIRST NAME   MIDDLE NAME   SUFFIX    7. INDIVIDUAL'S LAST NAME   STATE   POSTAL CODE   COUNTRY    7. INDIVIDUAL'S LAST NAME   STATE   POSTAL CODE    9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Amendment authorized by a Debto				
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ORGANIZATION DEBTOR  8. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.  9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.  9a. ORGANIZATION'S NAME  Heritage Bank	TI TAVIS (C. SOLIONENI LANDE DE LA TAVOS OS ODOMINATIONI	76 HUDIODIOTION OF ODGANIZATION	Z= ODCANIZATIONAL IO # :	<u> </u>
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10.OPTIONAL FILER REFERENCE DATA				
Judge of Probate - Loan # 127038900 / MRW	Judge of Probate - Loan # 127038900 / MRW			