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

IMPORTANT — READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM — DO NOT DETACH STUB 083708

		Sh	elby Cn	00054730 Pg 1/1 28 ty Judge of Probat 3 13:56:00 FILED/0	te,AL	[ED
UCC FINANCING STATEMENT AMENDM FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] HELEN ANCIC B. SEND ACKNOWLEDGMENT TO: (Name and Address)	ENT					
FIRST COMMERCIAL BANK P. O. BOX 11746 BIRMINGHAM, AL 35202-1746						
				FILING OFFICE USE		
1a. INITIAL FINANCING STATEMENT FILE #				INANCING STATEMENT / filed [for record) (or record)		
1998-02118 SHELBY COUNTY JOP				filed [for record] (or record) ESTATE RECORDS.		
 TERMINATION: Effectiveness of the Financing Statement identified a CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law. 						// IL
	and address of assignes in item 7c:	and also give pame of as	signor in its	m 9		
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b 5. AMENDMENT (PARTY INFORMATION): This Amendment affects						
CHANGE name and/or address: Give current record name in item 6a or 6 name (if name change) in item 7a or 7b and/or new address (if address of 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME OR ALLIE LAST MAKE	hange) in item 7cto be delete	me: Give record name d in item 6a or 6b.	item	name: Complete item 7a o 7c: also complete items 7d	-7a (if apr	olicable)
Bb. INDIVIDUAL'S LAST NAME			MIDDLE NAME S		SUFFI	
RAY	THOMAS		IJ	· · · · · · · · · · · · · · · · · · ·	-	
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME		<u></u>	· <u></u> -		· · · · · · · · · · · · · · · · · · ·	
7b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME		SUFF	X
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE COL		COUN	TRY
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORG	ANIZATION	7g. ORGAN	NIZATIONAL ID #, if any		
DEBTOR		:				NON
8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated continuation of file #1998-021.		ateral assigned.				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS adds collateral or adds the authorizing Debtor, or if this is a Termination authorizing Debtor.	•				/ a Debto	· which
9a. ORGANIZATION'S NAME						
OR FIRST COMMERCIAL BANK	FIRST NAME		MIDDLE N	AME	SUFFI	×
9b. INDIVIDUAL'S LAST NAME	I INCINE		IVII COLLE IV	**************************************		, .

10. OPTIONAL FILER REFERENCE DATA