



UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER (optional) JERALYN CHASTAIN 2056653371 B. SEND ACKNOWLEDGMENT TO: (Name and Address) THE PEOPLES BANK AND TRUST CO. 4949 HIGHWAY 17 HELENA, AL 35080 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is 1a. INITIAL FINANCING STATEMENT FILE # to be filed [for record] (or recorded) in the Filed On: 08/08/00 REAL ESTATE RECORDS. 2000-26785 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. 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 period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9. Secured Party of record. Check only one of these two boxes. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor <u>or</u> Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. ADD name: Complete item 7a or 7b, and also DELETE name: Give record name item 7c; also complete items 7d-7g (if applicable). to be deleted in item 6a or 6b. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME SUFFIX MIDDLE NAME FIRST NAME 6b. INDIVIDUAL'S LAST NAME G BRANDON HERRING 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME SUFFIX MIDDLE NAME 7b. INDIVIDUAL'S LAST NAME FIRST NAME POSTAL CODE COUNTRY STATE CITY 7c. MAILING ADDRESS 35124 ALPELHAM 312 COALES BRANCH CIR 7g. ORGANIZATIONAL ID #, if any ADD'L INFO RE 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7d. TAX ID #: SSN OR EIN ORGANIZATION NONE 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 THE PEOPLES BANK AND TRUST CO. MIDDLE NAME SUFFIX FIRST NAME 9b. INDIVIDUAL'S LAST NAME 10. OPTIONAL FILER REFERENCE DATA