## UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)

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

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			20040116000030 Shelby Cnty Ju 01/16/2004 10	0220 Pg 1/1 udge of Proba	_
UCC FINANCING STATEMENT AMENDMEN	T				
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 35202					
Dirmingham, An JJ202					
		THE ABOVE SPAC	E IS FOR FILING C	EFICE USE ON	I <b>Y</b>
1a. INITIAL FINANCING STATEMENT FILE #			1b. This FINANCING	STATEMENT AM	ENDMENT is
20020711000320760 Shelby County	An amain a to all the state and the same		to be filed [for red  X REAL ESTATE F		<u> </u>
<ol> <li>TERMINATION: Effectiveness of the Financing Statement identified above is</li> <li>CONTINUATION: Effectiveness of the Financing Statement identified above</li> </ol>	اوناكر بدالومالوماور ماروماري فيبيدا ويداوي موروي والمترجون	والمراجع والم والمراجع والمراجع والمراجع والمراجع والمراجع والمراجع والمراج			
continued for the additional period provided by applicable law.					
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and ac 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Deb	ساحد ساحد بمنظرها نداري واسترسان	والمحالية الرواي والرواي والرواي والرواي والرواي والرواي			<del></del>
Also check one of the following three boxes and provide appropriate information in ite		TOOOTO. Officer offing one	OT (11000 (110 00x00).		
CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.	DELETE name: Give record name to be deleted in item 6a or 6b.		ADD name: Complitem 7c; also comp		
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	<del></del>				<del></del>
Sterling Companies, LLC					
6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME		SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:				<u> </u>	<del> </del>
7a. ORGANIZATION'S NAME					
OR 76. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME		SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CO	ODE	COUNTRY
7d. SEE INSTRUCTIONS   ADD'L INFO RE   7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORG	SANIZATION	7g. ORGANIZATIONA	L ID #, if any	
ORGANIZATION DEBTOR					NONE
8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box.  Describe collateral deleted or added, or give entire restated collateral		,_,,			
Describe collateraldeleted oradded, or give entirerestated collatera	i description, or describe co	lateralassigned.			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEN adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by	- — –				Debtor which
9a. ORGANIZATION'S NAME	, L DOGGI, GIOGR HOID A				<del></del>
First Commercial Bank					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME	1	SUFFIX
10. OPTIONAL FILER REFERENCE DATA	<u> </u>				