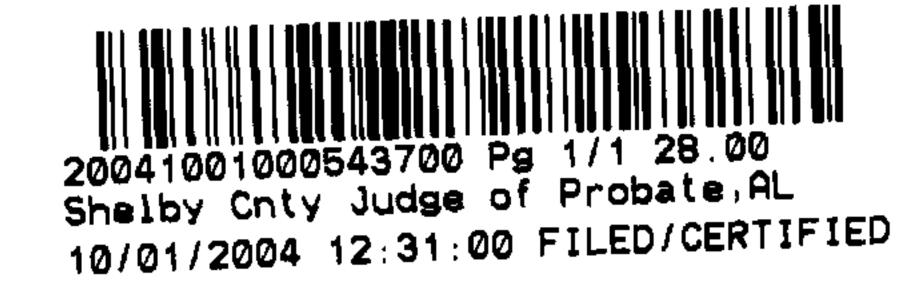
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UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] (760) 918-2745 Christi Carrell B. SEND ACKNOWLEDGMENT TO: (Name and Address) Please return copy to: CT CORPORATION SYSTEMS/UCC Attn: Eleanor Puls 1350 Treat Blvd. Suite 100 Walnut Creek CA 94597-2152 800-874-8820 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 Instrument #1999-45407 filed on 11/16/99 REAL ESTATE RECORDS. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. 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 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. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects | Debtor or | Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions DELETE name: Give record name ADD name: Complete item 7a or 7b, and also item 7c; in regards to changing the name/address of a party. also complete items 7e-7g (if applicable). to be deleted in item 6a or 6b. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME South Tacala, LLC FIRST NAME MIDDLE NAME SUFFIX 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 7c. MAILING ADDRESS CITY POSTAL CODE COUNTRY STATE 7d. SEEINSTRUCTIONS 7e. TYPE OF ORGANIZATION ADD'L INFO RE 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any **ORGANIZATION** DEBTOR NONE 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 American Commercial Capital, LLC FIRST NAME MIDDLE NAME SUFFIX 10 OPTIONAL FILER REFERENCE DATA 6202884-01 Filed w/ Secretary of State, AL - #930344002 Unit 4409