UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]  B. SEND ACKNOWLEDGMENT TO: (Name and Address)  A lagasco #26 South 20th street Birmingham, A1 35798		20050106000006410 Pg Shelby Cnty Judge of 01/06/2005 09:20:00 F	Probate, AL ILED/CERTIFIED
DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a of 1a. ORGANIZATION'S NAME		ACE IS FOR FILING OFFICE USE	ONLT
15. INDIVIDUAL'S LAST NAME  NOULEZ	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS  1d. TAX ID #1. SSN OR FIN. JAPON INFO DE 14. TYPE OF OROANITATION	Pelhan	STATE POSTAL CODE  AL 35124	COUNTRY
1d. TAX ID #: SSN OR FIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any	NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one de 2a. ORGANIZATION'S NAME	ebtor name (2a or 2b) - do not abbreviate or combine	names	
OR 2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN   ADD'L INFO RE   2e. TYPE OF ORGANIZATION   ORGANIZATION   DEBTOR	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	Плоне
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR  3a. ORGANIZATION'S NAME	S/P) - insert only <u>one</u> secured party name (3a or 3b)		NONE
OR HIADAMAC GAS COY DOVAGE  3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
4. This FINANCING STATEMENT covers the following collateral:	Birmingham	144 35 245	
	GM580453 JH07008	. ,	

9. NAME OF FIRST DEBTOR (1a or 1b) ON		ATEMENT			
9a. ORGANIZATION'S NAME					
OR					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SUFFIX			
Mulez	IVYY				
10. MISCELLANEOUS:	1	•			
119 Cedar Cove					
, , , ,	,				
Pelhan, A135	>107				
			THE ABOVE SPACE	IS FOR FILING OFFIC	E USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL	LEGAL NAME - insert only one				
11a. ORGANIZATION'S NAME					· · · · · · · · · · · · · · · · · · ·
OR					Louisens
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
TIC. WIZIEITO ADDITEGO					
	11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZAT	ION 11g. ORG	3ANIZATIONAL ID#, if an	y
ORGANIZATION DEBTOR	. <u></u>	]		u	NONE
12. ADDITIONAL SECURED PARTY'S	or ASSIGNOR S/P	'S NAME - insert only <u>one</u> name (12a	or 12b)		
12a. ORGANIZATION'S NAME.	in a wince	) T_ 1			
OR 12b. INDIVIDUAL'S LAST NAME	YM 4 DVMC	FIRST NAME	MIDDLE	NAME	SUFFIX
120. HADIAIDOALO LACTITATIONE	J				
12c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
PO.Box 1783		Pelhan	A1	35124	
13. This FINANCING STATEMENT covers time	per to be cut or as-extracted	d 16. Additional collateral description:			
collateral, or is filed as a fixture filing.  14. Description of real estate:					
14. Description of real estate.					
77-1-79					
Pack 12- F					
of Jefferson	conti				
03 0030 00 1	<b>,</b>				
map 60015					
		•			
Lot 12 Block 3	according to				
Survey of Cedan	OV= Phase I	Z			
as recorded in map is in Shelby Coun	bock 10 1934				
	<i>.</i>				
15. Name and address of a RECORD OWNER of a (if Debtor does not have a record interest):	bove-described real estate				
		17. Check only if applicable and che	ck <u>only</u> one box.		
		Debtor is a Trust or Truste	e acting with respect to p	roperty held in trust or	Decedent's Estate
		18. Check only if applicable and che	eck <u>only</u> one box.		
		Debtor is a TRANSMITTING UTILITY			
		Filed in connection with a Manuf			
		Filed in connection with a Public	-Finance Transaction — e	ffective 30 years	·

UCC FINANCING STATEMENT ADDENDUM