48-55	20050627000317380 1/2 \$31.75
ふん カラ	Shelby Cnty Judge of Probate, A

UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address) Address of the property of the property

14 TO 1	
	20050627000317380 1/2 \$31.75
8.75	Shelby Cnty Judge of Probate, AL
	06/27/2005 02:28:14PM FILED/CER
4 / 5	

 DEBTOR'S EXACT F 	ULL LEGAL NAME - insert only one debtor nai	me (1a or 1b) - do not abbreviate or combine names	SPACE IS FOR FILING OFFICE US	
1a. ORGANIZATION'S N				
OR 1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
Mu	1/2/	Steven	6	
1c. MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
2000 King 1	Lales PL.	Habaster	M 35007	USA
14 TAY ID # SSN OR PIN	ADD'L INFO RE 1e. TYPE OF ORGANIZATION	ON 1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any	
	ORGANIZATION DEBTOR		i	NON
2. ADDITIONAL DEBTO	R'S EXACT FULL LEGAL NAME - insert onl	ly <u>one</u> debtor name (2a or 2b) - do not abbreviate or comb	ine names	
2a. ORGANIZATION'S N.				<u> </u>
OR 2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
	ADD'L INFO RE 2e. TYPE OF ORGANIZATI	ON 2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	
2d. TAX ID #: SSN OR EIN				
2d. TAX ID #: SSN OR EIN	ORGANIZATION DEBTOR	ļ	†	NON
	ORGANIZATION DEBTOR	IGNOR S/P) - insert only one secured party name (3a or 3	3b)	NON
	ORGANIZATION DEBTOR NAME (or NAME of TOTAL ASSIGNEE of ASS	IGNOR S/P) - insert only <u>one</u> secured party name (3a or	3b)	NON
3. SECURED PARTY'S 3a. ORGANIZATION'S NA 100 Colors	ORGANIZATION DEBTOR NAME (or NAME of TOTAL ASSIGNEE of ASSIGNEE) AME	IGNOR S/P) - insert only <u>one</u> secured party name (3a or	3b)	NON
3. SECURED PARTY'S	ORGANIZATION DEBTOR NAME (or NAME of TOTAL ASSIGNEE of ASSIME AME CO	IGNOR S/P) - insert only <u>one</u> secured party name (3a or secured party name)	MIDDLE NAME	SUFFIX
3. SECURED PARTY'S 3a. ORGANIZATION'S NA ACCORD 3A. ORGANIZATION'S NA ACCORD 3B. ORGANIZATION'S NA ACCORD ACCORD 3B. ORGANIZATION'S NA ACCORD A	ORGANIZATION DEBTOR NAME (or NAME of TOTAL ASSIGNEE of ASSIME AME CO			
3. SECURED PARTY'S 3a. ORGANIZATION'S NA ACCORD 3A. ORGANIZATION'S NA ACCORD 3B. ORGANIZATION'S NA ACCORD A	ORGANIZATION DEBTOR NAME (or NAME of TOTAL ASSIGNEE of ASSIGNEE O			

VCC36C2C Sex#0411549774

DMS80704BN Sex#0504210614

CAPF042B2C Sex#0502093100

\$2500.00

5. ALTERNATIVE DESIGNATION [if applicable]:			E/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [ESTATE RECORDS. Attach Addendum	for record] (or recorded) i	n the REAL [if applicable]	7. Check to REC	UEST SEARCH REPO	ORT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
8. PTIONAL FILER REFERENCE DATA							

OVE SPACE IS FOR FILING OFFIC	EUSEONLY	
names		
MIDDLE NAME STATE POSTAL CODE	SUFFIX	
R 35007	451	
11g. ORGANIZATIONAL ID #, if an	y NO	
	······································	
MIDDLE NAME	SUFFIX	
STATE POSTAL CODE AL 35212	COUNTRY (15/	
	Decedent's Esta	
Debtor is a Trust or Trustee acting with respect to property held in trust or 18. Check only if applicable and check only one box.		
\ \	كريد والمناس والمنازون والمناول والمناول المناول المناول والمناول والمناول والمناول والمناول والمناول	