

200601170000023600 1/1 \$.00 Shelby Cnty Judge of Probate,AL 01/17/2006 10:38:34AM FILED/CERT

FOL	C FINANCING STATEMENT AMENDME!  LOW INSTRUCTIONS (front and back) CAREFULLY  NAME & PHONE OF CONTACT AT FILER [optional]					
B.	Tonia Rivers (205) 868-4845  SEND ACKNOWLEDGMENT TO: (Name and Address)		•	•		
	First Commercial Bank 800 Shades Creek Parkway Birmingham, AL 35209					
			•	•		
			THE ABOVE SPA	ACE IS FOR FI	LING OFFICE USE	ONLY
14.	NITIAL FINANCING STATEMENT FILE # 20050722000368840	Shelby	County		ANCING STATEMENT d [for record) (or record) STATE RECORDS.	
2.	X TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with res	pect to security interest(s) of the			
3.	CONTINUATION: Effectiveness of the Financing Statement identified at continued for the additional period provided by applicable law.	pove with respect to se	curity interest(s) of the Secured	Party authorizing	this Continuation Stat	ement is
4.1	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	l address of assignee	item 7c: and also also name of	assignor in item	).	, <u>, , , , , , , , , , , , , , , , , , </u>
	MENDMENT (PARTY INFORMATION): This Amendment affects					
•	uso check one of the following three boxes and provide appropriate information in	n items 6 and/or 7.				
	CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.	to be deleted	: Give record name i item 6a or 6b.	item 7c; als	Complete item 7a or 7 to complete items 7e-70	(if applicable).
,	CA. ORGANIZATION'S NAME	<u>, , , , , , , , , , , , , , , , , , , </u>	ر ما در			
<b>~</b>	Terrestrial Holdings		•	•		•
	66. INDIVIDUAL'S LAST NAME	FIRST NAME	چور او در این	MIDDLE NAME		SUFFIX
7 1	HANGED (NEW) OR ADDED INFORMATION:					
	7a. ORGANIZATION'S NAME		المان ال		و هو شارات الله من المناسبة و جوان الله من المناسبة و المناسبة و المناسبة و المناسبة و المناسبة و المناسبة و ا	<u>, , , , , , , , , , , , , , , , , , , </u>
OR			ور در المراجع ا			
	76. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAM		SUFFIX
7c. l	MAILING ADDRESS	CITY		STATE PO	STAL CODE	COUNTRY
	•		•		•	
7d.	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	71. JURISDICTION	OF ORGANIZATION	7g. ORGANIZA	ATIONAL ID #, if any	NONE
	MENDMENT (COLLATERAL CHANGE): check only one box.  escribe collateral deleted or added, or give entire restated collate	srai description, or des	scribe collateral assigned.			
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		<b>-</b>	•	•		
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				•	•	
	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI		· · · · · · · · · · · · · · · · · · ·			a Debtor which
ad	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMIds collateral or adds the authorizing Debtor, or if this is a Termination authorized as ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·			a Debtor which
ad	ds collateral or adds the authorizing Debtor, or if this is a Termination authorized a. ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·			
ad	ds collateral or adds the authorizing Debtor, or if this is a Termination authorized		· · · · · · · · · · · · · · · · · · ·		this Amendment.	a Debtor which