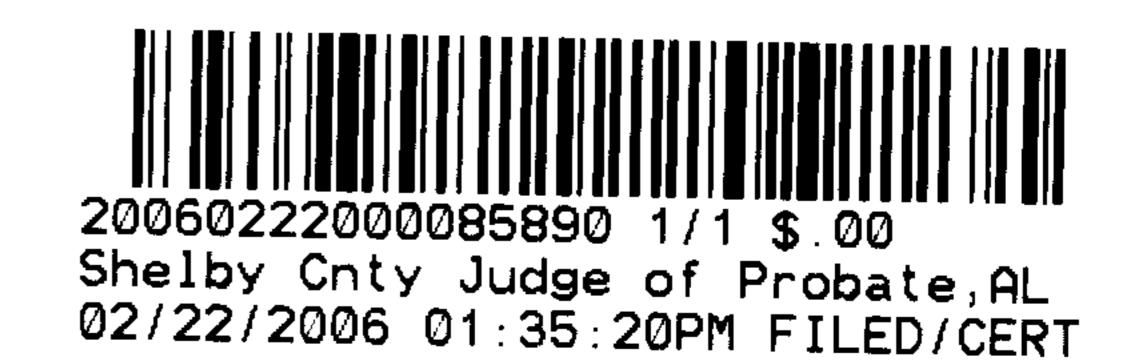
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UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] MARTHA HEYMAN 205-221-4111 B. SEND ACKNOWLEDGMENT TO: (Name and Address) PINNACLE BANK P.O. BOX 1388 JASPER, AL 35502-1388 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 20041102000603150 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. 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. ADD name: Complete item 7a or 7b, and also CHANGE name and/or address: Give current record name in item 6a or 6b; also give new DELETE name: Give record name item 7c; also complete items 7d-7g (if applicable). name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. to be deleted in item 6a or 6b. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME SHOAL CREEK BUILDING SERVICES, LLC OR 6b. INDIVIDUAL'S LAST NAME SUFFIX FIRST NAME MIDDLE NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME COUNTRY 7c. MAILING ADDRESS CITY STATE POSTAL CODE 7d. TAX ID #: SSN OR EIN 7e. TYPE OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any ADD'L INFO RE 7f. JURISDICTION OF ORGANIZATION ORGANIZATION X NONE DEBTOR 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 PINNACLE BANK SUFFIX FIRST NAME MIDDLE NAME 9b. INDIVIDUAL'S LAST NAME 10. OPTIONAL FILER REFERENCE DATA

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