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UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Phone:(800) 331-3282 Fax: (818)	662-4141
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	10656 PRIME ACCEPTAN
UCC Direct Services	11429525
P.O. Box 29071	ALAL
Glendale, CA 91209-9071	FIXTURE
File with: CC AL S	Shelby, AL

200706300000000000
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Shelby Cnty Judge of Probate, AL 06/20/2007 01:26:02PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1 0	BTOR'S EXACT FUI	ILLEGAL NAME -	nsert only one debtor name (1)	a or 1b) - do not abbreviate or combine nar	mes	· <del></del>	<u>.                                    </u>
	1a. ORGANIZATION'S						
	1b. INDIVIDUAL'S LAST	NAME		FIRST NAME CHARLIE	MIDDLE	NAME	SUFFIX
1c. M	YORK AILING ADDRESS COALS BRANCH	DR		CITY PELHAM	STATE	POSTAL CODE 35124	COUNTRY USA
	EE INSTRUCTIONS		1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	NONE
2. A[	DDITIONAL DEBTOR		GAL NAME - insert only one	debtor name (2a or 2b) - do not abbreviate	or combine na	mes	<u>.                                    </u>
	2a. ORGANIZATION'S	···					
OR	2b. INDIVIDUAL'S LAST NAME			FIRST NAME	MIDDLE	MIDDLE NAME	
2c. M	AILING ADDRESS	· · · · · · · · · · · · · · · · · · ·	<u> </u>	CITY	STATE	POSTAL CODE	COUNTRY
2d. <u>S</u>	SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG	SANIZATIONAL ID #, if any	NONE
3. Ş	ECURED PARTY'S N	NAME (or NAME of	TOTAL ASSIGNEE of ASSIGN	OR S/P) - insert only one_ secured party n	ame (3a or 3b	)	
	3a. ORGANIZATION'S Prime Acceptar	NAME					
OR	ЗЬ. INDIVIDUAL'S LAS	T NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
3c. N	MAILING ADDRESS  O W Jackson Biv	d. Suite 720		ClTY Chicago	STATE	POSTAL CODE 60606	COUNTRY USA

4. This FINANCING STATEMENT covers the following collateral:

RAINSOFT WATER SYSTEM

Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$7,634.00	
Mortgage tax due (\$.15 per \$100.00 or fraction thereof) \$11.55  5. ALTERNATIVE DESIGNATION [if applicable]   LESSEE/LESSOR   CONSIGNEE/CONSIGNOR   BAILEE/BAILOR   SELLER/BUYER	AG. LIEN NON-UCC FILING
6. X This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)  [if applicable] [ADDITIONAL FEE] [optional]	All Debtors Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	
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INANCING STATEME	ENT ADDENDUM		20070620000289480 2/2 \$39.55 Shelby Cnty Judge of Probate, AL			
NAME OF FIRST DEBTOR (1a or 1b)	ON RELATED FINANCING STATEM	ENT	Ø	6/20/2007	y Judge of Pro 7 01:26:02PM FI	bate,AL LED/CERT
9a. ORGANIZATION'S NAME						
9b. INDIVIDUAL'S LAST NAME YORK	FIRST NAME CHARLIE	MIDDLE NAME, SUFFIX				
MISCELLANEOUS						
1429525-AL-117						
0656 PRIME ACCEPTAN						
le with: CC AL Shelby, AL			THE ABOVE S	DACE IS ECE	R FILING OFFICE USE	ONLY
ADDITIONAL DEDTODIC EVACTE	ULL LEGAL NAME - insert only o <u>ne</u> n	ame (11a or 11b) - do not				· · · · · · · · · · · · · · · · · · ·
11a. ORGANIZATION'S NAME	OLL LEGAL NAIVIE - IIISER OINY OILE_ II	latile (118 of 115) do not		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	······································
ξ	····································	TIDOT NAME		MIDDLE	NAME	SUFFIX
11b. INDIVIDUAL'S LAST NAME	•	FIRST NAME				
c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
d. <u>SEE INSTRUCTION</u> ADD'L INFO ORGANIZA DEBTOR	l l	11f. JURISDICTION OF OR	GANIZATION	11g. OR	GANIZATIONAL ID#, i	f any
ADDITIONAL SECURED PAF	RTY'S or ASSIGNOR S/P's N	AME - insert only one nam	ne (12a or 12b)	·		
12a. ORGANIZATION'S NAME						
12b. INDIVIDUAL'S LAST NAME	<u></u> .	FIRST NAME		MIDDLE	NAME	SUFFIX
		- Curry	<del>,</del>	STATE	POSTAL CODE	COUNTRY
c. MAILING ADDRESS		CITY				
. This FINANCING STATEMENT covers	timber to be cut or as-extracted	16. Additional collateral de	scription:			<u></u>
collateral or is filed as a X fixture file						
. Description of real estate:						
Description: LOT 56 ACCORING HE FIRST SECTOR OF HID RECORDED IN MAP BOOK 20 PROBATE OFFICE OF SHEL	DEN CREEK II, AS 24, PAGE 94, IN THE					
5. Name and address of a RECORD OWNE (if Debtor does not have a record intere						
	•	17. Check only if applicable			norty hold in taxat	Decedent's Esta
•		Debtor is a Trust or			perty nero in trust C	Decedent's Esta
		18. Check only if applicable  Debtor is a TRANSMI		JUA.		
		Filed in connection with		ne Transactio	n effective 30 years	
		Filed in connection wi				