## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  Phone:(800) 331-3282 Fax: (818) 6	662-4141
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)	10656 PRIME ACCEPTAN
UCC Direct Services	12630211
P.O. Box 29071	ΑΙ ΑΙ
Glendale, CA 91209-9071	ALAL FIXTURE
File with: CC AL S	helbv. AL

- <b>2</b> 0071113	3000520160	0 112 30	,,,,
Shalby (	Chty Judge	e of Pro	)pale;HL
11/13/20	007 12:54	:20PM F]	(LED/CER)

60606

IL

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME OR FIRST NAME 1b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX **VICTOR** IRODRIGUEZ STATE POSTAL CODE CITY **COUNTRY** 1c. MAILING ADDRESS CALERA USA 35040 141 DAVENTRY DR AL ADD'L INFO RE 1e. TYPE OF ORGANIZATION 1d. SEE INSTRUCTIONS 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ORGANIZATION NONE DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME MIDDLE NAME 2b. INDIVIDUAL'S LAST NAME FIRST NAME **SUFFIX** 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY ADD'L INFO RE 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2d. SEE INSTRUCTIONS 2g. ORGANIZATIONAL ID #, if any ORGANIZATION NONE DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) 3a. ORGANIZATION'S NAME Prime Acceptance Corp. OR FIRST NAME 3b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX POSTAL CODE CITY 3c. MAILING ADDRESS STATE COUNTRY

Chicago

4. This FINANCING STATEMENT covers the following collateral:

WATER TREATMENT SYSTEM

200 W Jackson Blvd. Suite 720

Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing state. Mortgage tax due (\$.15 per \$100.00 or fraction thereof)		
	NSIGNEE/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 ESTATE RECORDS. Attach Addendum  8. OPTIONAL FILER REFERENCE DATA	REAL 7. Check to REQUEST SEARCH REPO	ORT(S) on Debtor(s) [optional] All Debtors Debtor 1 Debtor 2
12630211	6200	091703

USA

OLLOW INSTRUCTIONS (front and NAME OF FIRST DEBTOR (1a or 9a. ORGANIZATION'S NAME	MENT					
9b. INDIVIDUAL'S LAST NAME RODRIGUEZ	FIRST NAME VICTOR	MIDDLE NAME,SUFFIX				
D. MISCELLANEOUS						
2630211-AL-117						
0656 PRIME ACCEPTAN			Shei	lby Coty	2520160 2/2 \$37 y Judge of Prob 12:54:20PM FIL	ate,AL
20091703						
ile with: CC AL Shelby, AL			THE ABOVE SP	ACE IS FO	OR FILING OFFICE USE	ONLY
1. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only one	name (11a or 11b) - do not a	bbreviate or combin	e names		
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
id. <u>SEE INSTRUCTION</u> ADD'L IN ORGANIA DEBTOR	ZATION	11f. JURISDICTION OF ORGANIZATION 11g. ORGANIZATIONAL ID #, if any			f any NON	
ADDITIONAL SECURED PA	ARTY'S or ASSIGNOR S/P's N	NAME - insert only <u>one</u> name	e (12a or 12b)			
12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
This FINANCING STATEMENT covers collateral or is filed as a		16. Additional collateral desc	ription:			
Description of real estate:						
escription: LOT 11, ACCOI F DAVENTRY, SECTOR I, OOK 26, PAGE 98, IN THE HELBY COUNTY, ALABAM 006636283051002011000	PROBATE OFFICE OF					
. Name and address of a RECORD OWN (if Debtor does not have a record inter		17 Check only if applicable of	nd chock only one box			
		17. Check <u>only</u> if applicable and Debtor is a Trust or	nd check <u>only</u> one box. Frustee acting with resp		erty held in trust or	Decedent's Estat
		18. Check only if applicable a		· •	- 	
		l				

Filed in connection with a Manufactured-Home Transaction -- effective 30 years

Filed in connection with a Public-Finance Transaction -- effective 30 years