

	G STATEMENT AMENDINS (front and back) CAREFULLY	MENI				
	CONTACT AT FILER [optional]					
	GMENT TO: (Name and Address)					
Compass B	ank					
4958 Valley						
Suite 101						
	n, AL 35242					
				IS FOR FILING OFFICE		
1a. INITIAL FINANCING ST	ATEMENT FILE #		1b	. This FINANCING STATE	MENT AMENDMENT is recorded) in the	
2005102400055				to be filed [for record] (or REAL ESTATE RECORD	S	
	Effectiveness of the Financing Statement identifie	ed above is terminated with respect to secur	ity interest(s) of the Secu	red Party authorizing this Ten	mination Statement.	
3. CONTINUATION	: Effectiveness of the Financing Statement identificational period provided by applicable law.					
	ull or partial): Give name of assignee in item 7a	or 7b and address of assignee in item 7c; ar	nd also give name of assi	gnor in item 9.		
5. AMENDMENT (PAR	TY INFORMATION): This Amendment affect	ts Debtor or Secured Party of re	cord. Check only one of	these two boxes.		
Also check one of the fo	llowing three boxes and provide appropriate infor	mation in items 6 and/or 7.				
CUANCE same and	Vor address: Give current record name in item 6a	or 6b: also give new DELETE nam	ie: Give record name in item 6a or 6b.	ADD name: Complete it item 7c; also complete it	em 7a or 7b, and also lems 7d-7g (if applicable).	
6. CURRENT RECORD	ge) in item 7a or 7b and/or new address (if address in the company of the company	ss changer in item ro.			-	
6a. ORGANIZATION						
1	Investments, LLC					
OR 6b. INDIVIDUAL'S LAST NAME		FIRST NAME	M	MIDDLE NAME SUFFIX		
					<u></u>	
	R ADDED INFORMATION:	· <u>·</u> ··································				
7a. ORGANIZATION	SNAME					
OR THE WIGHT ACT MANE		I CANAL AND THE RESERVE OF THE PARTY OF THE	TN	MIDDLE NAME SUFFIX		
76. INDIVIDUAL'S LAST NAME		FIRST NAME				
				TATE IDOCTAL CODE	COUNTRY	
7c. MAILING ADDRESS		CITY	"	TATE POSTAL CODE		
→				COCANDATIONAL ID # 1	<u> </u>	
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION		ATION 71. JURISDICTION OF ORGA	NIZATION	7g. ORGANIZATIONAL ID #, if any NONE		
	ORGANIZATION DEBTOR		·			
C ANTENIONIENT (CO	LLATERAL CHANGE): check only one box.					
6. AMENDMENT (CO	deleted or added, or give entire restat	ted collateral description, or describe colla	iteral assigned.			
Describe collateral	•					
Dortini Dalanca	Unit 78, Building 20, in Edenton, a Co which is recorded in Instrument 200704	ndominium, as established by that co	ertain Declaration of of Shelby County, Als	Condominium, bama, First		
Partial Release:	Amendment to Declaration of Condominium	m of Edenton as recorded in Instrum	申びた ふひひふかつからのひかたてつつきん	* 7. Whitimetrr		
	To Declaration of Condominium of Edent Declaration of Condominium of Edenton	as recorded in Instrument 200706060	00263790, and the 4	Vinerament to	•	
	The Declaration of Condominium of Eden Declaration of Condominium of Edenton	iton as recorded in Instrument 20070	62600029792V, 5 Amei	Moment to the		
	to which Reclaration of Condominium a	plan is attached as Exhibit "C" the	lefo' fod #2 lecolded	I IN the		
	Condominium Plat of Edenton, a Condomi Edenton, a condominium as recorded in	swenaments thereto,	VLCTGTOR OF	,		
	Incorporation of Edenton Residential Con the Office of the Judge of Probate	Amera Association, Inc., as records	d in Instrument 20070	1473AAAA2343A\	:	
	town of Wienton Desidential Owners les	rocietion. Inc., are attached as EXA	IDIC "B" CHELECO, COS	lectter aren en		
	Undivided interest in the Common Elements assigned to said Unit, by said Declaration of Condominium set out In Exhibit "D", together with rights in and to that certain Non-Exclusive Roadway Essement as set out in					
	Instrument 20051024000550530, in the 0	office of the Judge of Probate of Sh	elby County, Alabama.		•	
	جده بازار و درو درو درو درو درو درو از از از درو					
9. NAME OF SECUR	ED PARTY OF RECORD AUTHORIZING	THIS AMENDMENT (name of assignor,	if this is an Assignment).	תוטש זחפתםתחפתה או פותו זו Amendme במולוטים או	onzed by a Debior Wilkon	
adds collateral or adds	the authorizing Debtor, or if this is a Termination	authorized by a Debtor, check here	d enter name of DED 10	A Suu louzing uns Autendine	· 1 16.	
9a. ORGANIZATION	I'S NAME					
Compass Ban	k					
OR 96. INDIVIDUAL'S L		FIRST NAME	•	NIDDLE NAME	SUFFIX	
	•					
10. OPTIONAL FILER RE	-EKENCE DATA		•			
•	·		التنسكنك والبديد بالمساور والمساور والمساور والمساور والمساور والمساور والمساور والمساور والمساور والمساور			