COUNTRY

NONE

	LLOW INSTRUCTIONS (front and back) CAREF		! i			
Α. Ι	NAME & PHONE OF CONTACT AT FILER [optional]					
	Phone (800) 331-328	32 Fax (818)	662-4141			
В. \$	SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address)	11467 WACHO	VIA BANK			
	UCC Direct Services	1357567	9			
	P.O. Box 29071	ALAL				
	Glendale, CA 91209-9071	FIXTURE	=			
				THE ABOVE	SPACE IS FOR FILING O	FFICE USE ONLY
	INITIAL FINANCING STATEMENT FILE # 2001-40425 09/18/01 CC AL Shelby				1b. This FINANCING ST to be filed [for record REAL ESTATE REC	ATEMENT AMENDMENT is] (or recorded) in the ORDS.
2.	X TERMINATION: Effectiveness of the Financing States	nent identified above is	s terminated with respect to s	security interest(s) of th	e Secured Party authorizing	this Termination Statement.
3.	CONTINUATION: Effectiveness of the Financing Staten continued for the additional period provided by applicable law		vith respect to the security in	iterest(s) of the Secured	Party authorizing this Con	tinuation Statement is
4.	ASSIGNMENT (full or partial): Give name of assigne	e in item 7a or 7b a	nd address of assignee i	in 7c; and also give r	name of assignor in item	9.
	MENDMENT (PARTY INFORMATION): This Amendment Also check one of the following three boxes and provide CHANGE name and/or address: Give current record name in name (if name change) in item 7a or 7b and/or new address	appropriate inform item 6a or 6b; also give	ation in items 6 and/or 7. ve new DELETE r	f record. Check only <u>on</u> name: Give record name ted in item 6a or 6b.	e — ADD name: Com	olete item 7a or 7b. and also plete items 7d-7g (if applicable)
í	URRENT RECORD INFORMATION:				· 	
	6a. ORGANIZATION'S NAME Richey's Property LLC					
OR	6b. INDIVIDUAL'S LAST NAME	F	FIRST NAME		MIDDLE NAME	SUFFIX
7. C	HANGED (NEW) OR ADDED INFORMATION:	1	······································		•	
	7a. ORGANIZATION'S NAME			· · ·	· · · · · · · · · · · · · · · · · · ·	
OR	7b. INDIVIDUAL'S LAST NAME		IDCT NIANE		NAUDON E NIABAE	CUEEN
	TO. INDIVIDUAL S LAST NAIVIE		FIRST NAME		MIDDLE NAME	SUFFIX

CITY

deleted or added, or give entire restated collateral description, or describe collateral assigned.

7f. JURISDICTION OF ORGANIZATION

adds collateral or adds the authorizing Debtor, or it this is a Len	mination authorized by a Debtor, check here 🔙 and en	ter name of DEBTOR authorizing this Amendme	ent.
9a. ORGANIZATION'S NAME Wachovia Bank, National Association F/K/A	SOUTHTRUST BANK		
R	FIRST NAME	MIDDLE NAME	SUFFIX

7c. MAILING ADDRESS

7d. SEE INSTRUCTION

Describe collateral

ADD'L INFO RE

ORGANIZATION

8. AMENDMENT (COLLATERAL CHANGE): check only one box.

DEBTOR

13575679 Debtor Name: Richey's Property LLC 05/6467603546 01014703069

POSTAL CODE

7g. ORGANIZATIONAL ID #, if any

STATE

7e. TYPE OF ORGANIZATION

20080228000081680 2/2 \$.00 Shelby Cnty Judge of Probate, AL 02/28/2008 01:07:01PM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 2001-40425 09/18/01 CC AL Shelby 12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Wachovia Bank, National Association F/K/A SOUTHTRUST BANK OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

__ Description: SEE ORIGINAL FILING FOR DESCRIPTION OF PROPERTY

13. Use this space for additional information