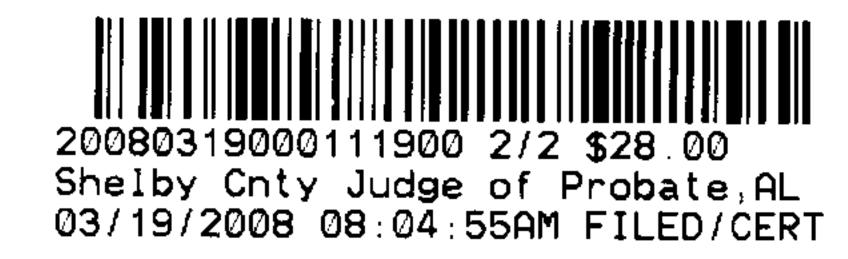


UCC FINANCING STATEMENT AMENDMEN' FOLLOW INSTRUCTIONS (front and back) CAREFULLY				
A. NAME & PHONE OF CONTACT AT FILER [optional]				
Ann Moore				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
Compass Bank 4958 Valleydale Road, Suite 101 Birmingham, Al. 35242				
	THE ABOVE SPA		R FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE #			FINANCING STATEMENT A e filed [for record] (or record	
See Attached List		RE/	AL ESTATE RECORDS.	_
2. TERMINATION: Effectiveness of the Financing Statement identified above is	terminated with respect to security interest(s) of the S	Secured Par	ty authorizing this Terminatio	n Statement.
3. CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	e with respect to security interest(s) of the Secured	Party author	orizing this Continuation Stat	tement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a	ddress of assignee in item 7c; and also give name of	assignor in	item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Deb	otor or Secured Party of record. Check only on	e of these	two boxes.	
Also check one of the following three boxes and provide appropriate information in it				<b>~</b>
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	o give new DELETE name: Give record name in item 7c. Deleted in item 6a or 6b.	AL	D name: Complete item 7a m 7c; also complete items 7c	or 7b, and also 1-7g (if applicable).
6. CURRENT RECORD INFORMATION:	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	· - · · - · · - · · · · · · · · · · · ·
6a. ORGANIZATION'S NAME				
Eddleman Homes, LLC	CIDOT MANAE	NAME	SUFFIX	
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	MIDDLE NAME	
7. CHANGED (NEW) OR ADDED INFORMATION:		•		<u>-</u>
7a. ORGANIZATION'S NAME				
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUFF		SUFFIX
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
7¢. MAICING ADDITEGO				
7d. TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   ORGANIZATION   DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORG	ANIZATIONAL ID #, if any	NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.				110112
Describe collateral deleted or added, or give entire restated collateral	al description, or describe collateral assigned.			
PARTIAL				
T . 00.66 1' 4 41 C CTT'-1.1 - 1.T -1 20	41. C - 4		andad in Man Daals	26 Dage
Lot 2966, according to the Survey of Highland Lakes, 29	th Sector, an Eddleman Community	, as reco	orueu in iviap book	30, rage
33-B, in the Probate Office of Shelby County, Alabama.				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM				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 DEE	TOR author	orizing this Amendment.	
9a. ORGANIZATION'S NAME				
OR	1	-   · · · - · - · ·	* * * * * * * * * * * * * * * * * * * *	<b>1</b> -
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
10, OPTIONAL FILER REFERENCE DATA				



## ADDENDUM TO UUC