UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY			ENT	20080429000173980 1/1 \$.00 Shelby Cnty Judge of Probate, AL 04/29/2008 10:50:50AM FILED/CERT		
A. NAI	ME & PHONE OF CO	NTACT AT FILER [optional]		04/29/20	08 10:50:50AM F	obate,AL ILED/CERT
	JFFIN/205.226.	1902 IENT TO: (Name and Address)				
o. ŞEI		TENT TO. (Name and Address)				
	ALABAMA F	OWER COMPANY				
		18TH STREET				
	BIRMINGHA	M, AL 35291				
			THEA		R FILING OFFICE US	
i. INIT	TIAL FINANCING STATE	20041019000576910/S	HELBY	to b	s FINANCING STATEME be filed [for record] (or rec	
	TERMINATION: Effe	ctiveness of the Financing Statement identified abo	ove is terminated with respect to security interes		AL ESTATE RECORDS.	ation Statement
<u> </u>		fectiveness of the Financing Statement identified				
		nal period provided by applicable law.		deducted the details	orizing this continuous	
	ASSIGNMENT (full or	partial): Give name of assignee in item 7a or 7b	and address of assignee in item 7c; and also	give name of assignor in	item 9.	·
АМ	ENDMENT (PARTY	INFORMATION): This Amendment affects	Debtor or Secured Party of record. C	heck only one of these t	two boxes.	
		ng three boxes and provide appropriate information	n in items 6 and/or 7.			
	CHANGE name and/or a name (if name change) i	ddress: Give current record name in item 6a or 6b n item 7a or 7b and/or new address (if address cha	o; also give new DELETE name: Give ange) in item 7c. DELETE name: Give	record name AD	DD name: Complete item m 7c; also complete item	7a or 7b, and als
	RRENT RECORD INF					
6a	. ORGANIZATION'S NA	ME				
₹			T		······································	······································
LOD.	E CASTRA	NAME	JOSEPH	MIDDLE	NAME	SUFFIX
			JUSEFT	E.	···	
	ANGED (NEW) OR AD ORGANIZATION'S NA	DED INFORMATION:				
' "	. ORGANIZATION OTT	*I ¥ 1 L_				
₹ 76 .	7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
DE CASTRA			MARY	J.		
MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTR
1163 AMBERLEY WOODS DRIVE		WOODS DRIVE	HELENA	AL	35080	
	X ID #: SSN OR EIN	ADD'L INFO RE 76. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATIO	ON 7g. ORG.	ANIZATIONAL ID #, if an	·
TAX		ΓERAL CHANGE): check only <u>one</u> box.				<u> </u>
	ENDMENT (COLLA)					
AMI	' <u>—</u>		llateral description or describe collateral	assigned		
AMI	' <u>—</u>	ted or added, or give entire restated col	llateral description, or describe collateral	assigned.		
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AMI	cribe collateral dele				an Amendment authorize	ed by a Debtor wh
AMI Desc	ME OF SECURED For collateral or adds the a	PARTY OF RECORD AUTHORIZING THIS uthorizing Debtor, or if this is a Termination author	AMENDMENT (name of assignor, if this is a	an Assignment). If this is		ed by a Debtor wh
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AMI Desc adds	ME OF SECURED For collateral or adds the a	PARTY OF RECORD AUTHORIZING THIS uthorizing Debtor, or if this is a Termination authorizing WER COMPANY	AMENDMENT (name of assignor, if this is a	an Assignment). If this is	rizing this Amendment.	ed by a Debtor wh