

20081110000436390 1/1 \$28.00	-
Shelby Cnty Judge of Probate,	AL
11/10/2008 03:32:38PM FILED/C	ËĐ.

	NG STATEMENT AMENDMEN			
	ONS (front and back) CAREFULLY			
	F CONTACT AT FILER [optional]			
Cathy Padgett: 2	<u>, , , , , , , , , , , , , , , , , , , </u>			
B. SEND ACKNOWLE	DGMENT TO: (Name and Address)			
Compass E	}ant⁄			
	ydale Road, Suite 101			
	m, Al 35242			
Diffillingna	III, AI JJZ42			
•	•			
	· · · · · · · · · · · · · · · · · · ·	THE ABOVE	SPACE IS FOR FILING OFFICE US	
1a. INITIAL FINANCING S	TATEMENT FILE #		1b. This FINANCING STATEMEN to be filed [for record] (or rec	
200510240005	50580		REAL ESTATE RECORDS.	orded) iii are
2. TERMINATION:	Effectiveness of the Financing Statement identified above i	s terminated with respect to security interest(s) of	f the Secured Party authorizing this Termina	ation Statement.
	N: Effectiveness of the Financing Statement identified about different period provided by applicable law.	ve with respect to security interest(s) of the Sec	cured Party authorizing this Continuation (Statement is
<u></u>	full or partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give nar	me of assignor in item 9.	
	· · · · · · · · · · · · · · · · · · ·		THE THE OF THE DOVER.	
	following three boxes <u>and</u> provide appropriate information in ind/or address: Give current record name in item 6a or 6b; als		name	7a or 7b, and also
name (if name char	nge) in item 7a or 7b and/or new address (if address change			s 7d-7g (if applicable).
6. CURRENT RECORD			·	
6a. ORGANIZATION				
	Investments, LLC		MIDDLE NAME	SUFFIX
6b. INDIVIDUAL'S L	ÄST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) O	R ADDED INFORMATION:			
7a. ORGANIZATION				
7b. INDIVIDUAL'S L	AST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY
7d. TAX ID #: SSN OR	EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	71. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if an	y
ORGANIZATION				NONE
	DEBTOR			
8. AMENDMENT (CC	LLATERAL CHANGE): check only <u>one</u> box. deleted or added, or give entire restated collate	rel description or describe colleteral Tassic	ned	
Describe collateral	deleted or added, or give entire restated collate	rai description, or describe conateral Lassig	de Desteration of Condominism	
TS - 2 1 TS - 1	Unit 65, Building 17, in Edenton, a Condor which is recorded in Instrument 2007042000	00184480, in the Probate Office of S	Shelby County, Alabama, First	
Partial Release:	Amendment to Declaration of Condominium of To Declaration of Condominium of Edenton	E Edenton as recorded in Instrument	20070508000215560, 2 Amendment	t
	Declaration of Condominium of Edenton as	recorded in Instrument 2007060600026	53790, and the 4th Amendment to	
	The Declaration of Condominium of Edenton Declaration of Condominium of Edenton as	as recorded in Instrument 200706260	000297920, 5th Amendment to the	Ď.
	to which Declaration of Condominium a plan	n is attached as Exhibit "C" thereto	o, and as recorded in the	
	Condominium Plat of Edenton, a Condominium Edenton, a condominium as recorded in Map	a, in Map Book 38, Page 77, and 1 Prock 39, Page 4, and any future and	Amended Condominium Plat of andments thereto. Articles of	
	Incorporation of Edenton Residential Owner	rs Association, Inc., as recorded in	n Instrument 20070425000639250,	
	In the Office of the Judge of Probate of S Laws of Edenton Residential Owners Associa	Shelby County, and to which said Dec ation. Inc., are attached as Exhibit	laration of Condominium the By- t "B" thereto, together with an	-
	Undivided interest in the Common Elements	assigned to said Unit, by said Decl	laration of Condominium set out	
	In Exhibit "D", together with rights in a Instrument 20051024000550530, in the Office	ad to that certain Non-Exclusive Ros ce of the Judge of Probate of Shelby	r County, Alabama.	
- 				
9. NAME OF SECUR	ED PARTY OF RECORD AUTHORIZING THIS AN	MENDMENT (name of assignor, if this is an Assi	ignment). If this is an Amendment authorized the Amendment	a by a Debtor Which
	s the authorizing Debtor, or if this is a Termination authorized	by a Debtor, check here and enter name of	——————————————————————————————————————	
9a. ORGANIZATION				
Compass Ban	k			
9b. INDIVIDUAL'S L	AST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER RE	FERENCE DATA			
10° ar isata ar isabeli isab				