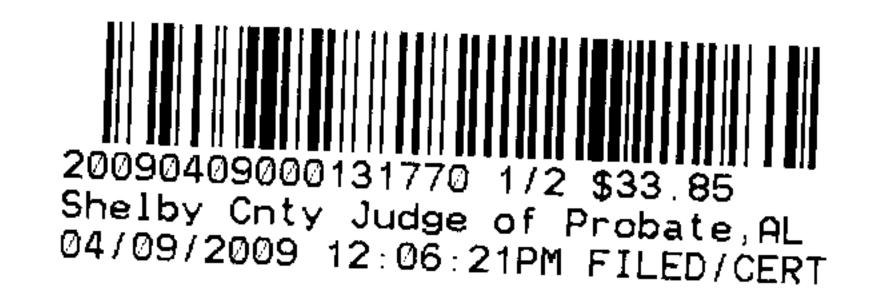
28.00 5.85



SUFFIX

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
The GAS LOS Zo South zoth st			
Bham A1 35295			
	THE ABOVE	SPACE IS FOR FILING OFFICE U	USE ONLY
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1	la or 1b) - do not abbreviate or combine names		
1a. ORGANIZATION'S NAME			
1b. INDIVIDUAL'S LAST NAME Treland	FIRST NAME,	MIDDLE NAME	SUF
1c. MAILING ADDRESS 276 Ashington Di	Bham	STATE POSTAL CODE A1 35-242	COL
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if ar	าy

TRIANG		Norme				
1c. MAILING ADDRESS	· ·	\sim	CITY	STATE	POSTAL CODE	COUNTRY
1276 Ashi	ryton		13 ham	A	35742	USI
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE	le. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG/	NIZATIONAL ID #, if any	•
	ORGANIZATION DEBTOR					NON
2. ADDITIONAL DEBTO	R'S EXACT FULL L	EGAL NAME - insert only one of	debtor name (2a or 2b) - do not abbreviate or com	bine names		
2a. ORGANIZATION'S N.	· · · · · · · · · · · · · · · · · · ·	· <u> </u>				
OR 2b. INDIVIDUAL'S LAST	NAME		FIRST NAME	MIDDLE	VAME	SUFFIX
			:			
2c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE	e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG/	NIZATIONAL ID #, if any	
	ORGANIZATION '		!		,	
	DEBTOR					NON
3. SECURED PARTY'S	NAME (or NAME of	TOTAL ASSIGNEE of ASSIGNOR	R S/P) - insert only one secured party name (3a or	3b)		
3a. ORGANIZATION'S NA	AME					
H GN						
OR 3b. INDIVIDUAL'S LAST	NAME OF	···································	FIRST NAME	MIDDLE	VAME	SUFFIX
	· ·· ··· · · · · · · · · · · · · · · ·				T/ 1/7/6-	
		· · · · · · · · · · · · · · · · · ·				
3c. MAILING ADDRESS	U.		CITY	STATE	POSTAL CODE	COUNTRY
70 Soull	> 1/4 \		1 1 2 hrsm	1 11	1	1101

20 SOUTH 20" 21 LJIVATII

4. This FINANCING STATEMENT covers the following collateral:

1 3Ton Teps of 10 md+ N29336AKB3005+ E091006080 1 3 Jan Tepston Cal Mat EDM2x36 BUZ St X080546420 75 m Tengstar Funnace MIX N8MPNOXBIDB258 + A-083344170

Amout Fir-	390000			
5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR SELLER/BUY	'ER AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for record] (or recorded ESTATE RECORDS. Attach Addendum	d) in the REAL 7. Check to REQ [if applicable] [ADDITIONAL	UEST SEARCH REPORT(S) on Debtor(s) FEE1 [optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA				

JCC FINANCING STATEMENT ADDENDUM		20090409000131770 2/2 \$33.85 Shelby Cnty Judge of Probate,AL 04/09/2009 12:06:21PM FILED/CERT		
OLLOW INSTRUCTIONS (front and back) CAREFULLY . NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING ST	TATEMENT			
9a. ORGANIZATION'S NAME				
96. INDIVIDUAL'S LAST NAME FIRST NAME HOVACE	MIDDLE NAME, SUFFIX			
D. MISCELLANEOUS:				
	•			
	THE	ABOVE SPACE	IS FOR FILING OFFIC	CE USE ONLY
1. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only on				
11a. ORGANIZATION'S NAME		·		
OR 445 INDIVIDUALIS LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
11b. INDIVIDUAL'S LAST NAME	FIRST NAIVIE		INAIVIE	30111
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 11e. TYPE OF ORGANIZATION ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11g. ORG	SANIZATIONAL ID #, if ar	ny
DEBTOR		1		NON
2. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P 12g QRGANIZATION'S NAME	'S NAME - insert only <u>one</u> name (12a or 12b)		
- Aranta Ata Alc				
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
	01777	CTATE	IDOCTAL CODE	COUNTRY
2c. MAILING ADDRESS	Plasant Corone	STATE	POSTAL CODE	COUNTRY
3. This FINANCING STATEMENT covers timber to be cut or as-extracted				
collateral, or is filed as a fixture filing. 4. Description of real estate:				
Lot 244 Brook Hishmand				
6th Sect 24 Phose				
m Book Pa				
Shelly Co At.				
5. Name and address of a RECORD OWNER of above-described real estate				
(if Debtor does not have a record interest):				
	17. Check only if applicable and check onl	y one box.	<u>. </u>	
	Debtor is a Trust or Trustee actir		operty held in trust or	Decedent's Esta
	18. Check only if applicable and check only			
	Debtor is a TRANSMITTING UTILITY			
	Filed in connection with a Manufacture			
	Filed in connection with a Public-Finan	nce Transaction — ef	tective 30 years	