

20090923000362390 1/1 \$28.00
Shelby Cnty Judge of Probate, AL
09/23/2009 10:55:09 AM FILED/CFR

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Tracye Tarver (205) 264-6132 B. SEND ACKNOWLEDGMENT TO: (Name and Address) Regions Bank 1900 5th Avenue North, 22nd Floor Birmingham, Alabama 35203 Attn: Tracye Tarver THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is 1a. INITIAL FINANCING STATEMENT FILE# to be filed [for record] (or recorded) in the 20060719000348090 in the Probate Office of Shelby County, Alabama REAL ESTATE RECORDS. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. 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. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. ADD name: Complete item 7a or 7b, and also DELETE name: Give record name item 7c; also complete items 7d-7g (if applicable). to be deleted in item 6a or 6b. 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME Emerald Ridge, LLC 6b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 76. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME COUNTRY POSTAL CODE STATE 7c. MAILING ADDRESS CITY 7g. ORGANIZATIONAL ID #, if any 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION ADD'L INFO RE **ORGANIZATION** NONE DEBTOR 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral / deleted or added, or give entire restated collateral description, or describe collateral assigned. Lot 26, according to the Survey of Emerald Ridge, Sector III, as recorded in Map Book 39, Page 35, in the Probate Office of Shelby County, Alabama. 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized 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 DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME Regions Bank 9b. INDIVIDUAL'S LAST NAME MIDDLE NAME FIRST NAME SUFFIX 10. OPTIONAL FILER REFERENCE DATA