UCC FINANCING STATEMENT

| UCC FINANCING STATEMENT | |
|---|--------------------------|
| FOLLOW INSTRUCTIONS (front and back) CAREFULLY | |
| A. NAME & PHONE OF CONTACT AT FILER [optional] | |
| Janice Ruffin (205) 226-1902 | |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address) | |
| Alabama Power Company 600 N 18th Street Birmingham, Alabama 35203 | |
| | |
| 1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (| 1a or 1b) - do not abbre |
| 1a. ORGANIZATION'S NAME | |

20100407000105770 1/3 \$34.35 Shelby Cnty Judge of Probate, AL 04/07/2010 02:26:57 PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY eviate or combine names SUFFIX 1b. INDIVIDUAL S LAST NAME FIRST NAME MIDDLE MAME COUNTRY POSTAL CODE 1c. MAILING ADDRESS US 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any ADD'L INFO RE 1d. TAX ID #: SSN OR EIN **ORGANIZATION** NONE DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME MIDDLE NAME SUFFIX FIRST NAME 2b. INDIVIDUAL'S LAST NAME POSTAL CODE STATE COUNTRY CITY 2c. MAILING ADDRESS US 2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any ORGANIZATION NONE DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) 3a. ORGANIZATION'S NAME ALABAMA POWER OR 3b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME POSTAL CODE COUNTRY 3c. MAILING ADDRESS STATE CITY AL **BIRMINGHAM** US 600 N 18TH STREET 35203 4. This FINANCING STATEMENT covers the following collateral: THE FOLLOWING HEAT PUMP WAS INSTALLED AT THE RESIDENCE LOCATED ON THE PROPERTY DESCRIBED IN ITEM #14 OF THIS FINANCING STATEMENT: BRAND: //2014/20 -048/C MODEL: SERIAL: NTA 081000236 SERIAL: AMOUNT: \$ 2,872

| 5. ALTERNATIVE DESIGNATION (if applicable | e]: LESSEE/LESSOR | CONSIGNEE/CONSIGNOR | BAILEE/BAILOR | SELLER/BUYER | AG. LIEN | NON-UCC FILING |
|---|---------------------------------------|---|--------------------|-------------------------------|-------------|-------------------|
| 6. This FINANCING STATEMENT is to be f ESTATE RECORDS. Attach Addend. | iled [for record] (or recorded) um | in the REAL 7. Check to REC [if applicable] [ADDITIONAL | QUEST SEARCH REPOR | RT(S) on Debtor(s) [optional] | All Debtors | Debtor 1 Debtor 2 |
| 8, OPTIONAL FILER REFERENCE DATA A | MOUNT: \$ | | | | | |

| OLLOW INSTRUCTIONS (front and back) 9. NAME OF FIRST DEBTOR (1a or 1b) C 9a. ORGANIZATION'S NAME | | ATEMENT | | | |
|--|--------------------------------|---|-------------|--|----------------|
| OR INDIVIDUALIC LACT NAME | TEIDOT NAME | MIQDLE NAME, SUFFIX | | | |
| 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | M | | | |
| Mac Queen | - V~ | #1/som | | | |
| 0. MISCELLANEOUS: | | | Shelby Cnty | 105770 2/3 \$34.3 Judge of Probat 02:26:57 PM FILE | e, AL |
| | | THE | ABOVE SPACE | IS FOR FILING OFF | CE USE ONLY |
| 11. ADDITIONAL DEBTOR'S EXACT FUL | L LEGAL NAME - insert only one | name (11a or 11b) - do not abbreviate or comb | ine names | | |
| 11a. ORGANIZATION'S NAME | | | | | |
| OR 11b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE | NAME | SUFFIX |
| | | | | | |
| 1c. MAILING ADDRESS | | CITY | STATE | POSTAL CODE | COUNTRY |
| LI TANZIO DE ENL JADOU MISO DE | TALE TYPE OF OPCANIZATION | 445 ILIDIODICTION OF ODC AND ZATION | 110.00 | CANIZATIONAL ID # if a | US |
| 1d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION | 11e. TYPE OF ORGANIZATION | 11f. JURISDICTION OF ORGANIZATION | į rių. Or | RGANIZATIONAL ID #, if a | III) |
| 2. ADDITIONAL SECURED PARTY | 'S or ASSIGNOR S/P' | S NAME - insert only <u>one</u> name (12a or 12b) | <u> </u> | | INC |
| 12a. ORGANIZATION'S NAME | <u> </u> | O THE WILL WILLOW TO THE TRANSPORT OF TEED | <u> </u> | | |
| OR | | Teresations | Lucou | - LLALIF | la: reen/ |
| 12b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE | - NAME | SUFFIX |
| 2c. MAILING ADDRESS | | CITY | STATE | POSTAL CODE | COUNTRY |
| | | | | | US |
| 3. This FINANCING STATEMENT covers | mber to be cut or as-extracted | 16. Additional collateral description: | | | |
| collateral, or is filed as a fixture filing. 4. Description of real estate: | | | | | |
| THE REAL PROPERTY DESC | RIRED ON THE | | | | |
| ATTACHED DEED: | KIDLD OIV THE | | | | |
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| | | | | | |
| Name and address of a RECORD OWNER of (if Debtor does not have a record interest): | above-described real estate | | | | |
| | | | | | |
| | | 17. Check only if applicable and check only | | | |
| | | Debtor is a Trust or Trustee actin | | property held in trust or | Decedent's Est |
| | | 18. Check only if applicable and check only | y one box. | | |
| | | Debtor is a TRANSMITTING UTILITY | | | |

Filed in connection with a Manufactured-Home Transaction — effective 30 years

Filed in connection with a Public-Finance Transaction — effective 30 years

18091212

THIS INSTRUMENT WAS PREPARED BY: Mary Margaret Relfe, Esquire 2700 Highway 280 East, Suite 60 Birmingham, AL 35223

SEND TAX NOTICE TO: Lyn Hilson MacQueen 2558 Comanche Drive Birmingham, AL 35244

OUITCLAIM DEED

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STATE OF ALABAMA COUNTY OF Shelby

KNOW ALL MEN BY THESE PRESENTS, that for and in consideration of the sum of TEN DOLLARS(\$10.00) and other good and valuable consideration, in hand paid to the undersigned. the receipt whereof is hereby acknowledged, the undersigned Lyn Hilson MacQueen, formerly known as Elva Carolyn Hilson Stockham, and husband. Donald Angus MacQueen (hereinafter call grantors) hereby remises, releases, quitclaims, grants, sells and conveys to LYN HILSON MACQUEEN (hereinafter called grantee), all right, title, interest and claim in or to the following described real estate, situated in Shelby County, Alabama, to-wit:

Lot 21, according to the Third Sector, Indian Valley Subdivision Survey, as recorded in Map Book 5, Page 97, in the Probate Office of Shelby County, Alabama.

To have and to hold to said grantee forever.

Given under our hands and seals this 18th day of September. 1998,

(Scal)

STATE OF ALABAMA Shelby County

I, the undersigned authority, a notary public in and for said county, in said state, hereby certify that Lyn Hilson MacOneen, formerly known as Elva Carolyn Hilson Stockham and Donald Angus MacOucen whose name(s) are signed to the foregoing conveyance, and who are known to me, acknowledged before me on this day, that, being informed of the contents of the conveyance, they executed the same voluntarily on the day the same bears date.

Given under my hand and official seal this 18th day of September. 1998.

MY COMMISSION EXPIRES: 8/22/2000 MUMMINIMAN PUBLIC

Inst + 1998-39506

10/08/1996-39504 DE: 19 PH CERTIFIED MELLY COUNTY JOSE OF PRODUTE 801 CM 3.80