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Shelby Chty Judge of Probate, AL 05/10/2010 12:39:33 PM FILED/CERT UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Phone (800) 331-3282 Fax (818) 662-4141 B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 19877 AQUA FINANCE, 23134075 CT Lien Solutions P.O. Box 29071 ALAL Glendale, CA 91209-9071 **FIXTURE** THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE # This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. 20090416000139530 04/16/09 CC AL Shelby Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. **TERMINATION:** Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Continuation Statement is **CONTINUATION:** 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 7c; and also give name of assignor in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor <u>or</u> 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 DELETE name: Give record name ADD name: Complete item 7a or 7b, and also name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. to be deleted in item 6a or 6b. item 7c; also complete items 7d-7g (if applicable) 6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME OR 6b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX SMITH CHOOK 7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 7c. MAILING ADDRESS CITY POSTAL CODE STATE COUNTRY 7d. SEE INSTRUCTION 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any ADD'L INFO RE ORGANIZATION DEBTOR NONE 8. AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.

9a. ORGANIZATION'S NAME		- · · · · · · · · · · · · · · · · · · ·	·····
AQUA FINANCE INC			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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23134075 Debtor Name: SMITH, CHOOK X400816616 19877

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UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20090416000139530 04/16/09 CC AL Shelby 12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME AQUA FINANCE INC OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX 13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Description: APN 13-5-22-3-003-112-000 SUBD WYNDHAM WYNWOOD SECTOR PH 03 CENSUS TRACT\BLOCK 303.17/1 TWNSHP\RANGE\SECT 20-3W-22 LEGAL BOOK\PAGE 24-129 LEGAL LOT 354