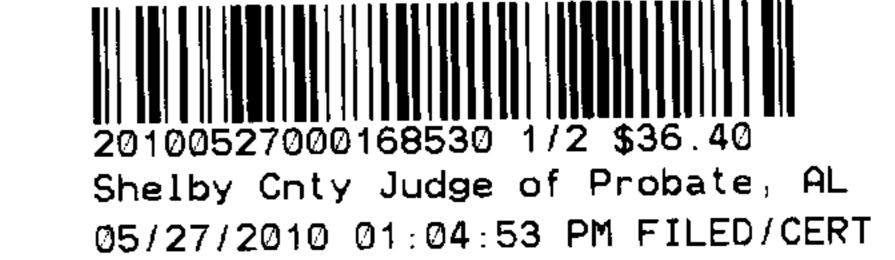
2 Shorth



UCC FINANCING STATEMENT

A. NAME & PHONE OF CONTACT AT FILER [optional]	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) Alagasco #20 South 20th Street BIRMINGHAM, AL 35295	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

			- THE ADOT	- OFACE IS TO	TH FILING OFFICE US	EUNLT
DEBTOR'S EXACT F	ULL LEGAL NAM	E - insert only <u>one</u> debtor name (1a	or 1b) - do not abbreviate or combine names			
					<u></u>	
1b. INDIVIDUAL'S LAST I	NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
Nesmith		Arthur				
1c. MAILING ADDRESS		CITY	STATE		COUNTRY	
932 Frontier Drive ADD'L INFO RE 19. TYPE OF ORGANIZATION ORGANIZATION DEBTOR		Pelham	AL	35124		
		1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any		
DDITIONAL DERTOR	. 	LECAL NAME income only one				NONE
		LEGAL INAIVIE - Insert only one o	debtor name (2a or 2b) - do not abbreviate or com	nbine names		
2b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		SUFFIX	
2c. MAILING ADDRESS ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION		CITY	STATE	POSTAL CODE	COUNTRY	
		2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any		
		· · · · · · · · · · · · · · · · ·				NONE
		of TOTAL ASSIGNEE of ASSIGNOR	R S/P) - insert only <u>one</u> secured party name (3a or	r 3b)		
Alabama Gas Co	rporation					
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME		
MAILING ADDRESS	<u></u>	· · · · · · · · · · · · · · · · · · ·	CITY	STATE	POSTAL CODE	COUNTRY
#20 South 20th St	reet		Birmingham	AL	35295	
	1b. INDIVIDUAL'S LAST IN Nesmith MAILING ADDRESS Prontier Drive ADDITIONAL DEBTOR 2a. ORGANIZATION'S NA ALING ADDRESS ALING ADDRESS ALING ADDRESS MAILING ADDRESS MAILING ADDRESS MAILING ADDRESS	1b. INDIVIDUAL'S LAST NAME Nesmith MAILING ADDRESS 2. Frontier Drive ADD'L INFO RE ORGANIZATION DEBTOR DDITIONAL DEBTOR'S EXACT FULL 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME MAILING ADDRESS ADD'L INFO RE ORGANIZATION DEBTOR BECURED PARTY'S NAME (or NAME of NA	1b. INDIVIDUAL'S LAST NAME Nesmith MAILING ADDRESS 2. Frontier Drive ADD'L INFO RE ORGANIZATION DEBTOR DDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one of the companization of the companization debtor 2a. ORGANIZATION'S NAME ADD'L INFO RE ORGANIZATION DEBTOR ADD'L INFO RE ORGANIZATION DEBTOR ADD'L INFO RE ORGANIZATION DEBTOR DECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNORS) AND ORGANIZATION STANDER ORGANIZATION DEBTOR ALabama Gas Corporation 3b. INDIVIDUAL'S LAST NAME	DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME 1b. INDIVIDUAL'S LAST NAME Nesmith Arthur Althur Appline Drive Appline Debtor App	DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names 1a. ORGANIZATION'S NAME 1b. INDIVIDUAL'S LAST NAME Nesmith Arthur Lloyd ARILING ADDRESS Petham AL ADD'L INFO RE ORGANIZATION DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME PIRST NAME ADD'L INFO RE ORGANIZATION DEBTOR ADD'L INFO RE ORGANIZATION DEBTOR	10. INDIVIDUAL'S LAST NAME Nesmith Arthur Lloyd MAILING ADDRESS CITY Pelham AL 35124 ADDLINFO RE Pelham AL ADDLINFO RE PERST NAME FIRST NAME MIDDLE NAME ADDLINFO RE POSTAL CODE ADDLINFO RE POST

4. This FINANCING STATEMENT covers the following collateral:

58STA070-1-16 s/n 0610A18355 Gas Furnace 24ABB336A003 s/n 1610E08166 A/C CNPVP3617ATA s/n 0410421362 A/C Evaporator Coil \$5,575.00

5. ALTERNATIVE DESIGNATION [if applicable]: LES	SSEE/LESSOR CONSIGNEE/CONSIGNO	R BAILEE/BAILOR SELLER/B	BUYER AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for red ESTATE RECORDS. Attach Addendum		REQUEST SEARCH REPORT(S) on Debto NAL FEE! [optional]	or(s) All Debtors	Debtor 1 Debtor 2
R OPTIONAL FILER REFERENCE DATA				

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UCC FINANCING STATE FOLLOW INSTRUCTIONS (front and						
9. NAME OF FIRST DEBTOR (1a or		EMENT				
9a. ORGANIZATION'S NAME	10) 011 1(22) 1120 1 110 110 110 110					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
Nesmith	Arthur	Lloyd				
10. MISCELLANEOUS:						
					IS FOR FILING OFFI	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only one na	me (11a or 11b) - do not abbrevi	ate or combine names	, .		
11a. ORGANIZATION'S NAME						
OR		T				
11b. INDIVIDUAL'S LAST NAME		FIRST NAME	N	MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS		CITY	S	STATE	POSTAL CODE	COUNTRY
			<u> – </u>			
ADD'L INFO		11f. JURISDICTION OF ORGAN	IIZATION 1	1g. ORG	SANIZATIONAL ID#, if ar	1y
DEBTOR		<u> </u>				NON
12. ADDITIONAL SECURED PA	RTY'S or ASSIGNOR S/P'S	NAME - insert only one name	(12a or 12b)			
A&L Services, Inc.						
OR 12b. INDIVIDUAL'S LAST NAME	- 	FIRST NAME		AIDDLE I	N A N 4 1	Tauren
12b. INDIVIDUAL O EACH NAME		T INST WAIVE	I IN	/IDDLE	IVAIVIE	SUFFIX
12c. MAILING ADDRESS	· · · · · · · · · · · · · · · · · · ·	CITY		STATE	POSTAL CODE	COUNTRY
3607 Guyton Ridge Drive		Hoover		AL	35244	COONTRY
13. This FINANCING STATEMENT covers		16. Additional collateral descrip				
collateral, or is filed as a 📝 fixture filin		TOT THE CONTROLLE GOODING				
14. Description of real estate:						
LOT 13, BLOCK	\[\)					
CAHABA VALLEY	ESTATES					
ELOND SECTON; A	S RECORDED					
N MAP BOOK SI PI	AGE 93. IN					
ROBATE OFFICE O						
7L. IN SHELBY	COUNTY					
	¬.					
15. Name and address of a RECORD OWNI	ED of above described real actate					
(if Debtor does not have a record interest						
		47 61 1 14 11 14				
		17. Check <u>only</u> if applicable and	·			-
	,			ect to pr	operty held in trust or	Decedent's Estat
		18. Check <u>only</u> if applicable and				
		Debtor is a TRANSMITTING				
		Filed in connection with a M				
		Filed in connection with a P	ublic-Finance Transacti	on — ef	fective 30 years	