

LICC FINANCING STATEMENT AMENDMENT

UCC FINANCIA FOLLOW INSTRUCTION		ENT AMENDMEI O CAREFULLY	NT			
A. NAME & PHONE OF						
Corporation Serv	ice Company	1-800-858-5294				
B. SEND ACKNOWLE	OGMENT TO: (Nan	ne and Address)				
50533522 - 3	347950					
801 Adlai	on Service Co Stevenson Dr	•				
Springfield	d, IL 62703					
L		Filed In: Alabar	na Shelby	THE ABOVE SPACE	IS FOR FILING OFFICE	USE ONLY
1a. INITIAL FINANCING ST 20070920000441		007		11	b. This FINANCING STATEN to be filed [for record] (or REAL ESTATE RECORD	recorded) in the
2. TERMINATION:	Effectiveness of the Fi	nancing Statement identified above	is terminated with respect to secu	urity interest(s) of the Secu		
	Effectiveness of the ditional period provide	Financing Statement identified at ed by applicable law.	ove with respect to security interes	est(s) of the Secured Par	ty authorizing this Continuation	on Statement is
4. ASSIGNMENT (fi	ıll or partial): Give nar	me of assignee in item 7a or 7b and	I address of assignee in item 7c; a	nd also give name of assi	gnor in item 9.	
		l): This Amendment affects		ecord. Check only <u>one</u> of	i these two boxes.	
		<u>d</u> provide appropriate information in to the detailed instructions	n items 6 and/or 7. DELETE name: Give reco	ord name 🔽	7 ADD name: Complete item 7a	or7b and also item 7c
in regards to changin	g the name/address of a		to be deleted in item 6a or		also complete items 7e-7g (if a	
6. CURRENT RECORD 6a. ORGANIZATION'S		· · · · · · · · · · · · · · · · · · ·				······································
Donovan Bu	ilders, LLC					
6b. INDIVIDUAL'S LAST NAME			FIRST NAME		IIDDLE NAME	SUFFIX
7. CHANGED (NEW) OF	ADDED INFORMAT	ION:				
7a. ORGANIZATION'S					<u></u>	
OR						
7b. INDIVIDUAL'S LAST NAME			FIRST NAME	M	IDDLE NAME	SUFFIX
7c. MAILING ADDRESS			CITY	s	TATE POSTAL CODE	COUNTRY
	A D D K IN ISO D S					
7d. <u>SEE INSTRUCTIONS</u>	ORGANIZATION DEBTOR	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGA	NIZATION	g. ORGANIZATIONAL ID #, if	any \square_{NONE}
8. AMENDMENT (COL		•	· · · · · · · · · · · · · · · · · · ·			
Describe collateral 🗶	deleted or added	or give entire restated collate	eral description, or describe colla	iteral assigned.		
Partial Release Lot 2 Shelby County, Alab		the the survey of Willow O	aks, as recorded in Map B	ook 38, page 137A	, 137B & 137C, in the F	Probate Office of
		ORD AUTHORIZING THIS AN				
9a. ORGANIZATION'S	NAME					
ServisFirst B	ank					
9b. INDIVIDUAL'S LAS	TNAME		FIRST NAME	M	IDDLE NAME	SUFFIX
10,0PTIONAL FILER REFE				·		
Debtor: Donov	an Builders, L	LC - 7078				50533522