	IG STATEMENT AMEN  NS (front and back) CAREFULLY	IDMENT				
	CONTACT AT FILER [optional]					
RUFFIN/205.22	26.1902					
SEND ACKNOWLE	GMENT TO: (Name and Address)					
ΔΙΔΒΔΜ	A POWER COMPANY					
	H 18TH STREET					
	HAM, AL 35203		201006100001			
			Shelby Cnty	Judge of Pro	bate, AL	
			Ø6/1Ø/2Ø1Ø 1	11:10:58 AM F	ILED/CERT	
<b>L</b>			THE ABO	VE SPACE IS FO	OR FILING OFFICE US	SE ONLY
INITIAL FINANCING S	ATEMENT FILE # 2009081000030:	5770/SHFLBV			s FINANCING STATEME be filed [for record] (or rec	
				RE	AL ESTATE RECORDS.	·
	Effectiveness of the Financing Statement ide					
continued for the ac	Effectiveness of the Financing Statement ditional period provided by applicable law.	t identified above with respect to	o security interest(s) of the	Secured Party auth	orizing this Continuation	Statement is
ASSIGNMENT (f	Il or partial): Give name of assignee in item	7a or 7b and address of assign	ee in item 7c; and also oive	name of accionar in	item 0	
	TY INFORMATION): This Amendment	· · · · · · · · · · · · · · · · · · ·	ured Party of record. Chec	·		<del></del>
	lowing three boxes and provide appropriate	أحصبة المسجة	area raity of record. Cited	on only one or mese	two boxes.	
CHANGE name and	or address: Give current record name in iteme) in item 7a or 7b and/or new address (if a	m 6a or 6b; also give new	DELETE name: Give red	coru name	DD name: Complete item	7a or 7b, and al
	(C)	ddroop chonon) in Hom 7a			or marrie. Complete Rent	
CURRENT RECORD	NFORMATION:	ddress change) in item 7c.	to be deleted in item 6a		m 7c; also complete item	s /d-/g (if applic
	NFORMATION:	ddress change) in item 7c.			m 7c; also complete item	s /d-/g (if applic
6a. ORGANIZATION'	NFORMATION: NAME	ddress change) in item 7c.			m 7c; also complete item	s /d-/g (if applic
6a. ORGANIZATION'S	NFORMATION: NAME	ddress change) in item 7c.  FIRST NAME			m 7c; also complete item	SUFFIX
6a. ORGANIZATION'	NFORMATION: NAME			or 6bite	m 7c; also complete item	
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR	NFORMATION: NAME  ST NAME  ADDED INFORMATION:	FIRST NAME T		MIDDLE	m 7c; also complete item	
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT	NFORMATION: NAME  ST NAME  ADDED INFORMATION:	FIRST NAME T		MIDDLE	m 7c; also complete item	
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR	NFORMATION: S NAME  ADDED INFORMATION: NAME	FIRST NAME T		MIDDLE KAY	NAME	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S	NFORMATION: S NAME  ADDED INFORMATION: NAME	FIRST NAME L.		MIDDLE	NAME	
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT  CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA	NFORMATION: S NAME  ADDED INFORMATION: NAME	FIRST NAME L.		MIDDLE KAY	NAME NAME	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT  CHANGED (NEW) OR 7a. ORGANIZATION'S  7b. INDIVIDUAL'S LA WAILING ADDRESS	NFORMATION: S NAME  ADDED INFORMATION: S NAME  ST NAME	FIRST NAME L.	to be deleted in item 6a o	MIDDLE KAY	NAME	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH N   ADD'L INFO RE   7e. TYPE OF ORGAN	FIRST NAME L.  FIRST NAME  CITY  BIRMIN	to be deleted in item 6a o	MIDDLE KAY  MIDDLE STATE AL	NAME  POSTAL CODE	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS	NFORMATION: NAME  ADDED INFORMATION: NAME  REACH	FIRST NAME L.  FIRST NAME  CITY  BIRMIN	GHAM	MIDDLE KAY  MIDDLE STATE AL	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  REACH N ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT	GHAM	MIDDLE KAY  MIDDLE STATE AL	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  REACH N ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME CITY BIRMIN NIZATION 7f. JURISDICT OX.	GHAM TON OF ORGANIZATION	MIDDLE KAY  MIDDLE  STATE AL  7g. ORG	NAME E POSTAL CODE 35242	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION:  SNAME  ADDED INFORMATION:  NAME  ST NAME  REACH  N   ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR    LATERAL CHANGE): check only one boteleted or   added, or give entire   researched.	FIRST NAME  L.  FIRST NAME  CITY  BIRMIN  NIZATION  7f. JURISDICT  x.  stated collateral description, or	GHAM TON OF ORGANIZATION  describe collateral as	MIDDLE KAY  STATE AL  7g. ORG	NAME E POSTAL CODE 35242 ANIZATIONAL ID #, if any	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR E	NFORMATION: NAME  ADDED INFORMATION: NAME  T NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGANIZATION DEBTOR   ATERAL CHANGE): check only one bo	FIRST NAME L.  FIRST NAME  CITY  BIRMIN  NIZATION  7f. JURISDICT  x.  stated collateral description, or	GHAM TON OF ORGANIZATION  describe collateral as	MIDDLE KAY  MIDDLE AL  7g. ORG	NAME E  POSTAL CODE 35242  ANIZATIONAL ID #, if any	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 20 NARROWS TAX ID #: SSN OR El MENDMENT (COL escribe collateral  9a. ORGANIZATION'S 9a. ORGANIZATION'S	NFORMATION: NAME  ADDED INFORMATION: NAME  TO NAME  REACH  ADD'L INFO RE   7e. TYPE OF ORGAL ORGANIZATION DEBTOR    ATERAL CHANGE): check only one both deleted or added, or give entire resident of the company of the	FIRST NAME L.  FIRST NAME  CITY  BIRMIN  NIZATION  7f. JURISDICT  x.  stated collateral description, or	GHAM TON OF ORGANIZATION  describe collateral as	MIDDLE KAY  MIDDLE AL  7g. ORG	NAME E  POSTAL CODE 35242  ANIZATIONAL ID #, if any	SUFFIX
6a. ORGANIZATION'S 6b. INDIVIDUAL'S LA WRIGHT CHANGED (NEW) OR 7a. ORGANIZATION'S 7b. INDIVIDUAL'S LA MAILING ADDRESS 220 NARROWS TAX ID #: SSN OR El MENDMENT (COL Describe collateral   9a. ORGANIZATION'S 9a. ORGANIZATION'S	NFORMATION: NAME  ST NAME  ADDED INFORMATION: NAME  ST NAME  REACH N   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR   LATERAL CHANGE): check only one bodeleted or   added, or give entire   resident of resi	FIRST NAME L.  FIRST NAME  CITY  BIRMIN  NIZATION  7f. JURISDICT  x.  stated collateral description, or	GHAM TON OF ORGANIZATION  describe collateral as	MIDDLE KAY  MIDDLE AL  7g. ORG	NAME E  POSTAL CODE 35242  ANIZATIONAL ID #, if any	SUFFIX