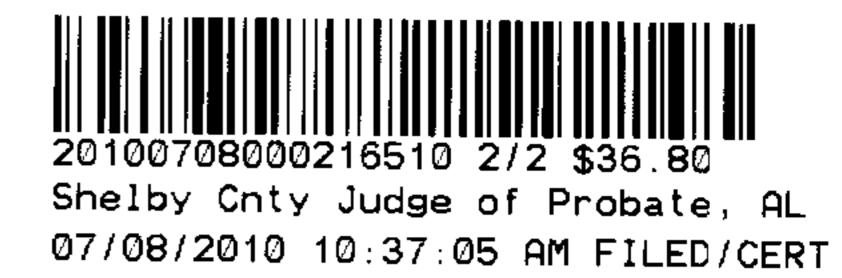
She)	JEN SO	20100708000216510 1/2 \$36.80 Shelby Cnty Judge of Probate, 07/08/2010 10:37:05 AM FILED/		
UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY	13/2 To			
A. NAME & PHONE OF CONTACT AT FILER [optional]				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
ALAGASCO				
#20 SOUTH 20TH STREET				
BIRMINGHAM AL 3: 295			•	
1 DERTOP'S EVACT FILLS I ECAL NAME involvement of the momentum.		SPACE IS FOR	R FILING OFFICE US	EONLY
DEBTOR'S EXACT FULL LEGAL NAME - insert only one_debto_mame (1a	or TD) - do not appreviate or compine names			
OR 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE N	IAME	SUFFIX
LAWRENCE	GEORGIANNA			
1c. MAILING ADDRESS 3007 LONGLEAF LANE	CITY HELENA	STATE	POSTAL CODE 35080	COUNTRY
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGAN 2 ATION ORGANIZATION DEBTOR	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #. if any		NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert carly one of 2a. ORGANIZATION'S NAME	debtor name (2a or 2b) - do not abbreviate or comb	oine names		
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUFFIX		SUFFIX
2c MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGAN ATION ORGANIZATION DEBTOR	2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any NONE		
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR ALAGASCO	R S/P) - insert only <u>one</u> secured party name (3a or 3	3b)		
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME SUFFIX		SUFFIX
3c. MAILING ADDRESS #20 SOUTH 20TH STREET	BIRMINGHAM	STATE	POSTAL CODE 35295	COUNTRY
4. This FINANCING STATEMENT covers the following collateral:		<u> </u>	F	
CONDENSER MODEL: NS4BD018KA				

MODEL: NS4BD018KA 1ST SERIAL: NSA090500864 2ND SERIAL: NSA090500865

COIL

MODEL: C6BHX24CA 1ST SERIAL: C6D080705779 2ND SERIAL: C6D100204314 JUD.

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LES		BAILEE/BAILOR SELLER/BUYER	AG. LIEN NON-UCC FILING
 This FINANCING STATEMENT is to be filed [for record] (or re ESTATE RECORDS. Attach Addendum 	corde The REAL 7, Check to REQ	UEST SEARCH REPORT(S) on Debtor(s) FEE] [optional]	All Debtors Debtor 1 Debtor 2
8, OPTIONAL FILER REFERENCE DATA			



9. NAME OF FIRST DEBTOR (1a or 19a. ORGANIZATION'S NAME		TEMENT				
9b. INDIVIDUAL'S LAST NAME LAWRENCE	FIRST NAME GEORGIANNA	MIDDLE NAME, SUFFIX				
10. MISCELLANEOUS:						
			THE ABOVE	SPACE	IS FOR FILING OFFIC	E USE ONLY
11. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only one n	ame (11a or 11b) - do not abbre	viate or combine nam	es		
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
11c. MAILING ADDRESS	······································	CITY		STATE	POSTAL CODE	COUNTRY
11d. TAX ID #. SSN OR EIN ADD'L INFO ORGANIZAT DEBTOR		11f. JURISDICTION OF ORGA	NIZATION	11g. OR0 -	GANIZATIONAL ID #, if an	y Noni
12. ADDITIONAL SECURED PAR	RTY'S or ASSIGNOR S/P'S	NAME - insert only <u>one</u> name	(12a or 12b)			
12a. ORGANIZATION'S NAME						
OR 12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
12c. MAILING ADDRESS		CITY	.	STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT covers collateral, or is filed as a fixture filing		16. Additional collateral descr	iption:			
14. Description of real estate:	y .					
LOT 17, ACCORDING TO TI	HE SURVEY OF ROYAL					
PINES, AS RECORDED IN MINISTRE PROBATE OFFICE OFFICE	IAP BOOK 11, PAGE 51,					
ALABAMA.	or shelbi Cootti,					
			•			
15. Name and address of a RECORD OWNE (if Debtor does not have a record interest					•	
		17. Check only if applicable ar	•			
		Debtor is a Trust or 18. Check only if applicable ar			roperty held in trust or	Decedent's Estate
		Debtor is a TRANSMITTING		••		
		Filed in connection with a	Manufactured-Home			
					··	