UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Alagas co

20 Sath 204 Street

Birminghan A1 35295

20100729000242030 1/2 \$34.40 Shelby Cnty Judge of Probate, AL 07/29/2010 01:33:49 PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. 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 FIRST NAME MIDDLE NAME SUFFIX ONROE 1c. MAILING ADDRESS STAJE POSTAL CODE COUNTRY Indian Crest Dr 2701 ADD'L INFO RE 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any **ORGANIZATION** DEBTOR NONE 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any **ORGANIZATION DEBTOR** NONE 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) 3a. ORGANIZATION'S NAME MIDDLE NAME SUFFIX 3c. MAILING ADDRESS POSTAL CODE COUNTRY

Carrier Condensing Unit & Cox'

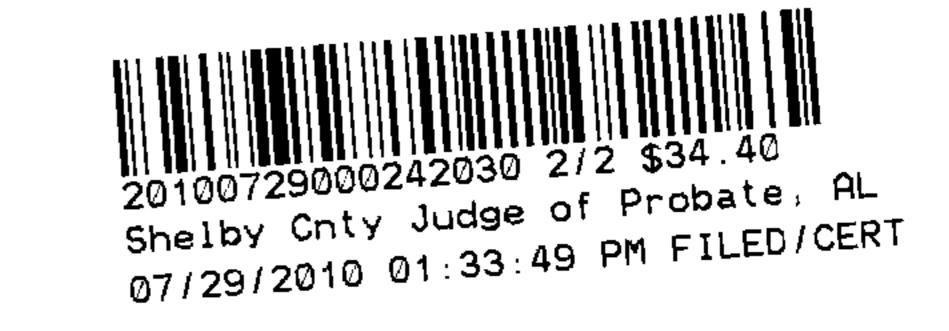
Condunt-Model# 24ABB336 A003 1010 Serial# 1510805705

Cond unit-Model# CNPVP4221ATAABAA Serial# 0309X222446

33.00

4. This FINANCING STATEMENT covers the following collateral:

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/		BAILEE/BAILOR SELLER/BUYER		NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for record] (ESTATE RECORDS. Attach Addendum	or recorded) in the REAL 7. Check to REQU [if applicable] [ADDITIONAL F	JEST SEARCH REPORT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
8. ORTIONAL FILER REFERENCE DATA				



UCC FINANCING STATEMENT ADDENDUM	07/29/2010 0.5			
FOLLOW INSTRUCTIONS (front and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING ST.	ATEMENIT			
9a. ORGANIZATION'S NAME	AICIVICINI			
OR 9b. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME,SUFFIX			
9b. INDIVIDUAL'S LAST NAME Strict Name	, IVIIDDLE IVAIVIE, SUMMIX			
10. MISCELLANEOUS:	•			
			IS FOR FILING OFFI	CE USE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one 11a. ORGANIZATION'S NAME	name (11a or 11b) - do not abbrev	iate or combine names		
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 RE 11e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	11f. JURISDICTION OF ORGAN	NIZATION 11g. OF	RGANIZATIONAL ID #, if a	ny NONE
12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S 12a. ORGANIZATION'S NAME	S NAME - insert only <u>one</u> name	(12a or 12b)		
OR 12b. INDIVIDUAL'S LAST NAME	TEIDOT NAME	launni c		CUEEN
12b. INDIVIDUAL S LAST MANIE	FIRST NAME	MIDDLE	NAME	SUFFIX
30000000000000000000000000000000000000	citydamsv	STATE M	POSTAL CODE	COUNTRY 5
 13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing. 14. Description of real estate: 	16. Additional collateral descri	otion:		
See 22 Twh 195				
Rng 2w NW44B9T NW/4				
North westerly row of Indian				
Chast Dr				
nep book 10 pg 48				
15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):				
	17. Check only if applicable an			
	Debtor is a Trust or T 18. Check <u>only</u> if applicable an	rustee acting with respect to put to deck only one box.	property held in trust or	Decedent's Estate
	Debtor is a TRANSMITTING	UTILITY		
	Filed in connection with a M	/lanufactured-Home Transaction	n — effective 30 years	

Filed in connection with a Public-Finance Transaction — effective 30 years