	AME & PHONE OF CONTACT AT FILER [optional]  LUFFIN/205.226.1902  END ACKNOWLEDGMENT TO: (Name and Address)  ALABAMA POWER COMPANY  600 NORTH 18TH STREET  BIRMINGHAM, AL 35203		20100907000288780 1/1 \$.00 Shelby Cnty Judge of Probate, Al 09/07/2010 02:21:36 PM FILED/CE	L
		THI	E ABOVE SPACE IS FOR FILING OFFICE US	EONLY
a. II	NITIAL FINANCING STATEMENT FILE # 20070910000423200/SHE	LBY	1b. This FINANCING STATEMEN to be filed [for record] (or record) REAL ESTATE RECORDS.	
. 🗴	TERMINATION: Effectiveness of the Financing Statement identified above is	s terminated with respect to security in		ation Statement.
	CONTINUATION: Effectiveness of the Financing Statement identified above	ve with respect to security interest(s)	of the Secured Party authorizing this Continuation S	Statement is
_	continued for the additional period provided by applicable law.	addrage of ancirpae is item 7e: and al	co civo nama of accionar in itam O	
	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a MENDMENT (PARTY INFORMATION): This Amendment affects Det			<u> </u>
	so check one of the following three boxes and provide appropriate information in it		Onder drug grow or though the dones.	
	CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	o give new DELETE name: 0		
(	URRENT RECORD INFORMATION:		on our ob.	
	6a. ORGANIZATION'S NAME			
5			······································	······································
	6b. INDIVIDUAL'S LAST NAME HOWSE	FIRST NAME  C A NIDD A	MIDDLE NAME	SUFFIX
	HOWSE	SANDRA		
	HANGED (NEW) OR ADDED INFORMATION:			
	7a. ORGANIZATION'S NAME			
R	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
c. N	IAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
1367 BUTLER ROAD		ALABASTER	AL 35007	
j. `	TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZA	TION 7g. ORGANIZATIONAL ID #, if any	y 
	DEBTOR			N
	MENDMENT (COLLATERAL CHANGE): check only one box.		<del>["""</del>	
	escribe collateral deleted or added, or give entire restated collatera	al description, or describe collateral	assigned.	
D	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI	ENDMENT (name of assignor, if this	s is an Assignment). If this is an Amendment authorize	d by a Debtor wh
D	AME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI			d by a Debtor wh
D N a				ed by a Debtor wh
. N	dds collateral or adds the authorizing Debtor, or if this is a Termination authorized			ed by a Debtor wh