UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS (front and back) CAREFULLY	INT		
A. NAME & PHONE OF CONTACT AT FILER [optional] John L. Hartman, III (205) 879-0500		20101015000345480 1/	1 \$29 00
B. SEND ACKNOWLEDGMENT TO: (Name and Address)		Shelby Cnty Judge of	Probate, AL
Talas Y YY	——	10/15/2010 02:17:59	PM FILED/CERT
John L. Hartman, III Hartman & Springfield			
P. O. Box 846			
Birmingham, AL 35201-0846			
	THE ABOV	E SPACE IS FOR FILING OFFICE	FIISE ONI V
a. INITIAL FINANCING STATEMENT FILE#		1b. This FINANCING STATE	MENT AMENDMENT
20050525000254510, 20060810000389940, 2006081		to be filed [for record] (or REAL ESTATE RECORD	ne
TERMINATION: Effectiveness of the Financing Statement identified above	e is terminated with respect to security interest(s) of	of the Secured Party authorizing this Ter	rmination Statement.
CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law.	above with respect to security interest(s) of the Se	cured Party authorizing this Continuat	ion Statement is
. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b ar	nd address of assignee in item 7c; and also give na	me of assignor in item 9	
ANICHONICAL CONTRACTOR	Debtor or Secured Party of record. Check of		
Also check one of the following three boxes and provide appropriate information	in items 6 and/or 7.		
CHANGE name and/or address: Give current record name in Item 6a or 6b; a name (if name change) in item 7a or 7b and/or new address (if address chan	also give new DELETE name: Give recordinge) in item 7c. to be deleted in item 6a or 6	name ADD name: Complete it item 7c; also complete it	iem 7a or 7b, and also tems 7d-7g (if applicat
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME			- I g th applicat
Cahaba Beach Investments, LLC			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	Loureny
			SUFFIX
. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME		•
	I INSTITUTE	MIDDLE NAME	SUFFIX
c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
			1000,111.
ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if	any
DEBTOR			Пио
AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collateral.	eral description, or describe collateral assign	ned.	
Unit 1004, Building 10, t	the Lofts at Edenton,	according to the	3rd
Amended Map, as recorded	in Map Book 41, Page	136, in the Probe	ite
Office of Shelby County,		, LUIJU	
orrade of bliciby country,	Alabama.		
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN adds collateral or adds the authorizing Debtor, or if this is a Termination authorized	MENDMENT (name of assignor, if this is an Assignor) of the Debtor, check here and enter name of the design of the later name of the later	nment). If this is an Amendment authori DEBTOR authorizing this Amendment.	ized by a Debtor which
9a. ORGANIZATION'S NAME			
Compass Bank			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
OPTIONAL EILED RECEDENCE DATA			
OPTIONAL FILER REFERENCE DATA			
dge of Probate, Shelby County			