SEND ACKNOWLEDGMENT  ALABAMA POW  600 NORTH 18TH  BIRMINGHAM, A  INITIAL FINANCING STATEMENT  * TERMINATION: Effectiveness  CONTINUATION: Effectiveness  continued for the additional per	ER COMPANY STREET L 35203  FILE# 20081023000415920/SHE s of the Financing Statement identified above	ELBY	20110124000024540 Shelby Cnty Judge 01/24/2011 03:12:  DACE IS FOR FILING OFFICE  1b. This FINANCING STATE	19 PM FILED/CER		
ALABAMA POWA 600 NORTH 18TH BIRMINGHAM, A  INITIAL FINANCING STATEMENT  ** TERMINATION: Effectiveness CONTINUATION: Effectiveness	ER COMPANY STREET L 35203  FILE# 20081023000415920/SHE s of the Financing Statement identified above	ELBY	20110124000024540 Shelby Cnty Judge 01/24/2011 03:12:  DACE IS FOR FILING OFFICE  1b. This FINANCING STATE	1/1 \$.00 of Probate, AL 19 PM FILED/CER		
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BIRMINGHAM, A  INITIAL FINANCING STATEMENT  ** TERMINATION: Effectiveness  CONTINUATION: Effectiveness	FILE# 20081023000415920/SHE s of the Financing Statement identified above	ELBY	Shelby Chty 30090 01/24/2011 03:12: PACE IS FOR FILING OFFICE  1b. This FINANCING STATE	19 PM FILED/CER		
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TERMINATION: Effectiveness CONTINUATION: Effectiver	20081023000415920/SHE s of the Financing Statement identified above	ELBY	1b. This FINANCING STATE	= USE ONLY		
CONTINUATION: Effectiver	s of the Financing Statement identified above					
CONTINUATION: Effectiver	s of the Financing Statement identified above		to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.			
CONTINUATION: Effectiver		is terminated with respect to security interest(s) of t	he Secured Party authorizing this Tel	rmination Statement.		
continued for the additional per	ess of the Financing Statement identified abo	ove with respect to security interest(s) of the Secu	red Party authorizing this Continuat	ion Statement is		
	od provided by applicable law.					
ASSIGNMENT (full or partial)	Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give name	of assignor in item 9.			
AMENDMENT (PARTY INFOR	MATION): This Amendment affects De	btor or Secured Party of record. Check only	one of these two boxes.			
	boxes and provide appropriate information in	items 6 and/or 7.				
name (if name change) in item 7	Give current record name in item 6a or 6b; als or 7b and/or new address (if address change	DELETE name: Give record name) in item 7c.  DELETE name: Give record name) to be deleted in item 6a or 6b.	ame ADD name: Complete it item 7c; also complete it	tem 7a or 7b, and also		
CURRENT RECORD INFORMAT			nom re, also complete t	terns ru-ry (ii applicas		
6a. ORGANIZATION'S NAME						
6b. INDIVIDUAL'S LAST NAME		· · · · · · · · · · · · · · · · · · ·				
DEES		FIRST NAME	MIDDLE NAME	SUFFIX		
		JAMES	G.			
CHANGED (NEW) OR ADDED IN 7a. ORGANIZATION'S NAME	FORMATION:					
A. OROMNIZATION STRAIGE						
7b. INDIVIDUAL'S LAST NAME	······································	FIRST NAME		·		
DEES		JILL	MIDDLE NAME	SUFFIX		
MAILING ADDRESS		CITY				
1566 OAK PARK DR		HELENA	AL 35080	COUNTRY		
	NFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION				
	IIZATION '	THE OTHER PROPERTY.	7g. ORGANIZATIONAL ID #, if	any		
				NO		
AMENDMENT (COLLATERAL	CHANGE): check only <u>one</u> box.	al description, or describe collateral assigned				