	Shell 39.		
JCC FINANCING STATEMENT OLLOW INSTRUCTIONS (front and back) CAREFULLY	1 July 25	20110217000055600 1 Shelby Cnty Judge of 02/17/2011 10:54:32	Probate, AL
A. NAME & PHONE OF CONTACT AT FILER [optional]			
3. SEND ACKNOWLEDGMENT TO: (Name and Address) TA/abama Gas Grood 20 South 20th 5			
Birnohn 35	297		
. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debt		E SPACE IS FOR FILING OFFICE US	EONLY
1a. ORGANIZATION'S NAME		,	
1b. INDIVIDUAL'S LAST NAME	FIRST NAME AT MON	MIDDLE NAME	SUFFIX
Hailing address	CITY	STATE POSTAL CODE A/ 35/78	COUNTRY
d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGAN ORGANIZATION DEBTOR		1g. ORGANIZATIONAL ID #, if any	NONE
. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - inse	ert only <u>one</u> debtor name (2a or 2b) - do not abbreviate or co	mbine names	
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGAN ORGANIZATION DEBTOR	IZATION 2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	NONE
SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of 3a. ORGANIZATION'S NAME	of ASSIGNOR S/P) - insert only <u>one</u> secured party name (3a o	or 3b)	
R 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
MAILING ADDRESS SOUTH 20th 5+	Birminchen	STATE POSTAL CODE A 37295	COUNTRY
This FINANCING STATEMENT covers the following collateral:			
FULN. KGHM.K	-GPN. 10 EB 2012	145 D307 F45	1000015
Cond 12Hm. 13,	AJ M42 AU1 - 80	033 643 100050	iΥ
Co./ RHM. R	CFL HM 41821 CC	028102229	
143000			
ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR	CONSIGNEE/CONSIGNOR BAILEE/BAILOR	SELLER/BUYER AG. LIEN	NON-UCC FILING
This FINANCING STATEMENT is to be filed [for record] (or recorded		ORT(S) on Debtor(s)	

201102170000055600 2/2 \$40.25 20110217000055600 2/2 \$40.25 Shelby Cnty Judge of Probate, AL Shelby Cnty Judge of Probate, AL 20117/2011 10:54:32 AM FILED/CERT

UCC FINANCING STATEMENT ADDENDU	VI I	92/17/2011 10:54:32 (AM FILED/CERI
FOLLOW INSTRUCTIONS (front and back) CAREFULLY	TATEMENT		
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING S 9a. ORGANIZATION'S NAME	TATEIVIENT		
OR			
96. INDIVIDUAL'S LAST NAME FIRST NAME FOR MONTH	MIDDLE NAME, SUFFIX		
10. MISCELLANEOUS:			
			E LICE ONLY
11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only or		ABOVE SPACE IS FOR FILING OFFIC	E USE ONLY
11a. ORGANIZATION'S NAME	ie name (Tra of Trb) - do not abbreviate or con	ibine names	
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
		····	JOUNTRY
L IC. K	: ► ,		SOUNTRY
1d. TAX ID #: SSN OR EIN TADD'L INFO KE 11e. TYPE OF ORGANIZATION		11g. ORGANIZATIONAL ID #, if an	у
ORGANIZATION ' DEBTOR		1	NON
2. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/F	P'S NAME - insert only <u>one</u> name (12a or 12b	b)	
12a. ORGANIZATION'S NAME A A A A A A A A A A A A A	! !		
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
3. This FINANCING STATEMENT covers timber to be cut or as-extracted	d 16. Additional collateral description:		
collateral, or is filed as a fixture filing. 4. Description of real estate:			
Lot 13-119			
B/1 2 5/4/50 Hills			
My 4			
RS# Ley			
In a by			
15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):			
	47 Objects 1 15 11 11 11 11 11 11 11 11 11 11 11 1		- .
	17. Check only if applicable and check on Debtor is a Trust or Trustee acti	ng with respect to property held in trust or	Decedent's Estate
	18. Check only if applicable and check on		Decedent's Estate
	Debtor is a TRANSMITTING UTILITY		
	Filed in connection with a Manufacture	ed-Home Transaction — effective 30 years	

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