

20110224000063840 1/1 \$29.00 Shelby Cnty Judge of Probate, AL 02/24/2011 02:23:55 PM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

CT Lien Solutions

P.O. Box 29071

Glendale, CA 91209-9071

Contact AT FILER [optional]

	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
1a. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING			
2008-13665			STATEMENT AMENDMENT		
2000-13003			is to be filed [for record] (or recorded) in the REAL ESTATE		
			RECORDS.	EAL ESTATE	
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination					
Statement.					
3. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is					
continued for the additional period provided by applicable law.					
4. 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 assignee in item 9.					
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes.					
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Please refer to the detailed instructions DELETE name: Give record name ADD name: Complete item 7a or 7b, and also item 7c:					
in regards to changing the name/address of a party. to be deleted in item 6a or 6b. also complete items 7e-7g (if applicable).					
6a. ORGANIZATION'S NAME					
OR					
WATERFORD, L.L.C.					
6b. INDIVIDUAL'S LAST NAME		MIDDLE NAME		SUFFIX	
FIRST NAME		MIDDLE NAME		SUFFIX	
7. CHANGED (NEW) OR ADDED INFORMATION:					
7a. ORGANIZATION'S NAME					
OR					
7h INDIVIDUALIS LAST MANAE					
7b. INDIVIDUAL'S LAST NAME		MIDDLE NAME		SUFFIX	
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COLDITON	
		SIAIE	FOSTAL CODE	COUNTRY	
7d. SEE INSTRUCTIONS ADD'L INFO RE- 7e. TYPE OF ORGANIZATION	7f. JURISDICATION OF ORGANIZATION	7g. ORGANI	ZATIONAL ID#, if any		
ORGANIZATION DEBTOR					
8. AMENDMENT (COLLATERAL CHANGE): check only one box:	<u> </u>			☐ NONE	
Describe collateral \(\omega \) deleted or \(\omega \) added, or give entire \(\omega \) restated collateral description	tion, or describe collateral assigned.				
Lot 596, according to the Survey of Waterford Cove-Sector 2, as recorded in Map Book 38, Page 6, in the Probate Office of Shelby County, Alabama.					
9. NAME of SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which					
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.					
9a. ORGANIZATION'S NAME OR					
RBC BANK (USA), a North Carolina banking corporation					
	IEIRST NAME	MIDDLE N	AME	CHEETY	
Jacklynn C	askeyTNAME	MIDDE© IN	AUVIE	SUFFIX	
10. OPTIONAL FILER REFERENCE DATA // Vice President				· · · · · · · · · · · · · · · · · · ·	
FILING OFFICE COPY—UCCFINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)					