FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Dedra King						
3. \$	SEND ACKNOWLEDGMENT TO: (Name and Address)		201 Sho	10311000	0081570 1/1 \$ 00	
	National Bank of Commerce f/k/a Red Mountain B PO Box 381748 Birmingham, Alabama 35238	ank	- II	*~> ONLY	Judge of Probata 02:10:26 PM FILE	
				ACE IS FO	R FILING OFFICE USI	E ONLY
	NITIAL FINANCING STATEMENT FILE # 20091022000398450			1b. Thi	s FINANCING STATEMEN oe filed [for record] (or reco	T AMENDMEN
	TERMINATION: Effectiveness of the Financing Statement identified above is	s terminated with	n respect to security interest(s) of the			tion Statement.
. [CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.	ve with respect	to security interest(s) of the Secure	d Party auth	orizing this Continuation S	tatement is
T	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	address of assig	nee in item 7c; and also give name c	f assignor in	item 9.	
- /	MENDMENT (PARTY INFORMATION): This Amendment affects De	btor <u>or</u> Se	ecured Party of record. Check only o	one of these	two boxes.	
A	Iso check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in its CHANGE name and/or address: Give current record name in item 6a or 6b; also		. DELETE name: Give record name.	ne 🗖 Ar	DD name: Complete item 7	a or 7h, and al
Ļ	name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.	to be deleted in item 6a or 6b.		m 7c; also complete items	
	CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME					
	ADTRAV Corporation					
₹	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	=	MIDDLE	NAME	SUFFIX
(CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME					
R	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	FIRST NAME		MIDDLE NAME SUFFIX	
_	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTR
. 1	VIAILING ADDRESS	CITY		SIAIE	POSTAL CODE	COUNTR
	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDIC	CTION OF ORGANIZATION	7g. ORG	ANIZATIONAL ID #, if any	
_	DEBTOR 1 AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box.	<u> </u>				
	escribe collateral deleted or added, or give entire restated collater	al description, c	or describe collateral assigned			
	IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMI					l by a Debtor w
а	IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMIdds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME					l by a Debtor w
а	dds collateral or adds the authorizing Debtor, or if this is a Termination authorized					l by a Debtor w