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UCC FINANCING STATEMENT AMEND	MENT	Shelby Cnty Judge of Probate, AL 04/13/2011 02:13:25 PM FILED/CERT				
FOLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]						
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	· · · · · · · · · · · · · · · · · · ·					
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		THE ABOVE SPA	CE IS F	OR FILING OFFICE U	SE ONLY	
1a. INITIAL FINANCING STATEMENT FILE #	Indee of Ducke on 02	(21/2006	to	be filed [for record] (or re	•	
20060321000131450 filed with Shelby County, AI X TERMINATION: Effectiveness of the Financing Statement identified ab				EAL ESTATE RECORDS.  ty authorizing this Termin	ation Statement.	
CONTINUATION: Effectiveness of the Financing Statement identifie continued for the additional period provided by applicable law.	d above with respect to security inte	rest(s) of the Secured F	arty auth	orizing this Continuation	Statement s	
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 a	ssignor in	item 9.	·	
5. AMENDMENT (PARTY INFORMATION): This Amendment affects	<del></del>	f record. Check only one	of these	two boxes.		
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information CHANGE name and/or address: Give current record name in item 6a or name (if name change) in item 7a or 7b and/or new address (if address		name: Give record name led in item 5a or 6b.	☐ Al	DD name: Complete item em 7c; also complete item	7a or 7b, and also	
CURRENT RECORD INFORMATION:	change) in item 70.	ted in item 5a or 6b.		ani 70; also complete item	s ru-rg (ii applicabl	
6a. ORGANIZATION'S NAME						
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	FIRST NAME		MIDDLE NAME		
. CHANGED (NEW) OR ADDED INFORMATION:			<u> </u>			
7a. ORGANIZATION'S NAME				,		
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	FIRST NAME		MIDDLE NAME		
c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY	
d. TAX ID # SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR	7f. JURISDICTION OF ORG	SANIZATION	7g. ORG	<u> </u> ANIZATIONAL ID #, if any	/ Пиои	
			1		F F 144.714	
. AMENDMENT (COLLATERAL CHANGE): check only one box.			<u> </u>	<del></del> -		
. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated or	collateral description, or describe coll	ateral assigned.			1401	
<u> </u>	collateral description, or describe coll	ateral assigned.				
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Describe collateral deleted or added, or give entire restated of added, or give entire restated of the second seco	AMENDMENT (name of assignor, i	f this is an Assignment).	If this is a	n Amendment authorized		
Describe collateral deleted or added, or give entire restated of	AMENDMENT (name of assignor, i	f this is an Assignment).	If this is a	n Amendment authorized izing this Amendment.		
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS adds collateral or adds the authorizing Debtor, or if this is a Termination authorizing Debtor, Secured Bank, National Association, successive and succe	AMENDMENT (name of assignor, i	f this is an Assignment).	R author	izing this Amendment.		
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS adds collateral or adds the authorizing Debtor, or if this is a Termination authorizing adds to the authorizing Debtor.	AMENDMENT (name of assignor, i	f this is an Assignment). Id enter name of DEBTC	R author	izing this Amendment.		