



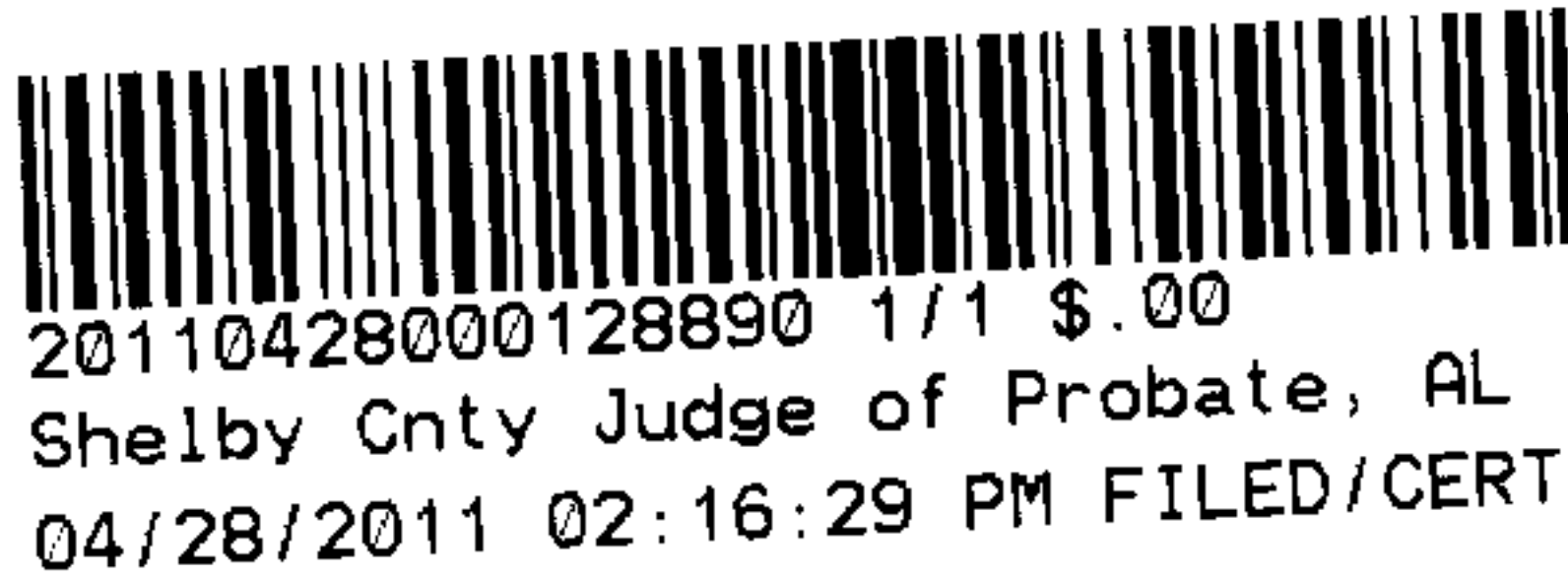
UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
J. RUFFIN/205.226.1902

B. SEND ACKNOWLEDGMENT TO: (Name and Address)  

ALABAMA POWER COMPANY  
600 NORTH 18TH STREET  
BIRMINGHAM, AL 35203



THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #  
20090112000009120/SHELBY

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.  
☐

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 assignor 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: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. ☐ DELETE name: Give record name to be deleted in item 6a or 6b. ☐ ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:  

6a. ORGANIZATION'S NAME

OR  
6b. INDIVIDUAL'S LAST NAME  
MIDDLETON  
FIRST NAME  
PAM  
MIDDLE NAME  
SUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:  

7a. ORGANIZATION'S NAME

OR  
7b. INDIVIDUAL'S LAST NAME  
FIRST NAME  
MIDDLE NAME  
SUFFIX

7c. MAILING ADDRESS  
22 COTTAGE CIRCLE  
CITY  
PELHAM  
STATE  
AL  
POSTAL CODE  
35124  
COUNTRY

7d. TAX ID #: SSN OR EIN  
ADD'L INFO RE ORGANIZATION DEBTOR  
7e. TYPE OF ORGANIZATION  
7f. JURISDICTION OF ORGANIZATION  
7g. ORGANIZATIONAL ID #, if any  
☐ NONE

8. AMENDMENT (COLLATERAL CHANGE): check only one box.  
Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned.

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  
ALABAMA POWER COMPANY

OR  
9b. INDIVIDUAL'S LAST NAME  
FIRST NAME  
MIDDLE NAME  
SUFFIX

10. OPTIONAL FILER REFERENCE DATA