| Alagasco 605 Richard Arrington Jr Blvd N Birmingham, AL 35203  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names  EXATIONS NAME  IAL'S LAST NAME  FIRST NAME  Melanie  IAL'S LAST NAME  Melanie  IAL'S LAST NAME  ADDIL INFO RE ORGANIZATION DEBTORS EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  | Alagasco 605 Richard Arrington Jr Blvd N Birmingham, AL 35203  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names  The ABOVE SPACE IS FOR FILING OFFICE USE ONLY  DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  STATE POSTAL CODE COU  ACDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  STATE POSTAL CODE COU  ACDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  ACTIVE OF GRANIZATION 19 - do not abbreviate or combine names  THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  ALL STATE POSTAL CODE COL  ACTIVE OF GRANIZATION 24 - IT ALL STATE POSTAL CODE COL  ACTIVE OF GRANIZATION 10 - 22 - ORGANIZATION 10 - 23 - ORGANIZATION 10 - 24 - IT ALL STATE POSTAL CODE COL  ACTIVE OF GRANIZATION'S NAME  ALAGAME  ALAG | LLOW INSTRUCTION NAME & PHONE OF C  | S (front and back) ONTACT AT FILE  | CAREFULLY<br>R [optional]  | 34   | 2011051<br>Shelby<br>05/17/2                         | 000147270 1/2 \$7000147270 of Pronty Judge of Pronty Judge of Pronty 12:41:27 PM | 34.25<br>obate, AL<br>FILED/CERT |
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| ADD'L INFO RE ORGANIZATION DEBTOR'S EXACT FULL LEGAL NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX  PARTY'S NAME POSTAL CODE COUNTRY AL 35080 US  SUFFIX  STATE POSTAL CODE COUNTRY AL 35080 US  LOCAL AL 35080 US  LOCAL AL 35080 US  ADD'L INFO RE Te. TYPE OF ORGANIZATION TE. TYPE OF ORG | This individual's Last name   First name   Middle   Sufficient   Nemeth   Melanie   Sufficient   Malling address   City   State   Postal code   County   AL   35080   US    ADDL INFO RE   Te. TYPE OF ORGANIZATION   Te. TYPE OF ORGANIZATION   Te. TYPE OF ORGANIZATION     DEBTOR   Te. TYPE OF ORGANIZATION   Te. TYPE OF ORGANIZATION   Te. TYPE OF ORGANIZATION   Te. TYPE OF ORGANIZATION     ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names.    2a. ORGANIZATION'S NAME     ADDITIONAL SLAST NAME   FIRST NAME   MIDDLE NAME   SUFFICIAL STATE   POSTAL CODE   COUNTY     ADDITIONAL SLAST NAME   Te. TYPE OF ORGANIZATION   21. JURISDICTIONOF ORGANIZATION   22. ORGANIZATIONAL ID #, if any ORGANIZATION     DEBTOR   SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party'S NAME   MIDDLE NAME   SUFFICIAL SASIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party'S NAME   MIDDLE NAME   SUFFICIAL SASIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party'S NAME   MIDDLE NAME   SUFFICIAL SASIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party'S NAME   MIDDLE NAME   SUFFICIAL SASIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party'S NAME   MIDDLE NAME   SUFFICIAL SASIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party'S NAME   MIDDLE NAME   SUFFICIAL SASIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party S/P NAME   MIDDLE NAME   SUFFICIAL SASIGNOR S/P) - insert only one secured party name (3a or 3b)    Secured Party S/P  |   |  | E - insert only <u>one</u> debtor name (1a   | or 1b) - do not abbreviate or combine names  |  |  |                                  |
| Melanie  RESS OVE  Melanie  CITY  Helena  AL 35080  US  ADD'L INFO RE 1e. TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION OBBTOR  DEBTOR  DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  ZATION'S NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  STATE POSTAL CODE  COUNTRY  STATE POSTAL CODE  COUNTRY  ADD'L INFO RE 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any  ORGANIZATION ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any  PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)  ZATION'S NAME  | Nemeth   Mclanic   | Ta. ORGANIZA HUN'S N  |  |  |  |  |  |                                  |
| CITY STATE POSTAL CODE COUNTRY DVC  Helena AL 35080 US  ADD'L INFO RE ORGANIZATION OF ORGANIZATION  | MAILING ADDRESS  02 COX COVC    AL   35080   US     ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names     2a. ORGANIZATION'S NAME     ADDITIONAL SLAST NAME   FIRST NAME   MIDDLE NAME   SUF     ADDITIONAL SLAST NAME   STATE   POSTAL CODE   COL     ADDITIONAL SLAST NAME   CITY   STATE   POSTAL CODE   COL     ADDITIONAL SLAST NAME   STATE   POSTAL CODE   COL     ALI   STATE   STATE   STATE   POSTAL CODE   COL     ALI   STATE   STATE   STATE   STATE   COL     ALI   STATE   STATE   STATE   STATE   COL     ALI   STATE   COL    | 1b. INDIVIDUAL'S LAST   | NAME   | ······································   |  | MIDDLE   | MIDDLE NAME  |                                  |
| Helena  AL 35080  US  ADD'L INFO RE ORGANIZATION DEBTOR  DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names  ZATION'S NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  RESS  CITY  STATE POSTAL CODE  COUNTR'  ADD'L INFO RE 2e. TYPE OF ORGANIZATION DEBTOR  ADD'L INFO RE 2e. TYPE OF ORGANIZATION DEBTOR  PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)  ZATION'S NAME   | ADDILINFO RE   1e. TYPE OF ORGANIZATION   11. JURISDICTION OF ORGANIZATION   12. ORGANIZATIONAL ID #, if any   | Nemeth  |  |  |  |  | TROOTEL CORE   | COLINITED                        |
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| ADD'L INFO RE   2e. TYPE OF ORGANIZATION   2f. JURISDICTION OF ORGANIZATION   2g. ORGANIZATIONAL ID #, if any ORGANIZATION   DEBTOR   PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)  ZATION'S NAME  | ADD'L INFO RE ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any ORGANIZATION DEBTOR ORGANIZATION 2g. ORGANIZATIONAL ID #, if any ORGANIZATION DEBTOR ORGANIZATION'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)  3a. ORGANIZATION'S NAME  Alagasco 3b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUF  MAILING ADDRESS  605 Richard Arrington Jr Blvd N Birmingham AL 35203 US  This FINANCING STATEMENT covers the following collateral:  Nutone Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426  |   | ORGANIZATION DEBTOR R'S EXACT FULL   | ·<br>·   |  | ' T  |  |                                  |
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| ${\tt O}$  | Alagasco  3b. INDIVIDUAL'S LAST NAME  FIRST NAME  MIDDLE NAME  SUF  MAILING ADDRESS  605 Richard Arrington Jr Blvd N  This FINANCING STATEMENT covers the following collateral:  Nutone Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426   | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  | ORGANIZATION DEBTOR  ADD'L INFO RE ORGANIZATION DEBTOR   | LEGAL NAME - insert only one of the control of the  | FIRST NAME  CITY  2f. JURISDICTION OF ORGANIZATION   | ombine names  MIDDLE  STATE  2g. ORG                 | NAME POSTAL CODE   | SUFFIX                           |
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|  | 605 Richard Arrington Jr Blvd N  Birmingham  AL  35203  US  Nutone Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  SECURED PARTY'S  3a. ORGANIZATION'S N  Alagasco   | ORGANIZATION DEBTOR  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME OF NAME OF NAME)   | LEGAL NAME - insert only one of the control of the  | FIRST NAME  CITY  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)                                       | ombine names  MIDDLE  STATE  2g. ORG                 | NAME  POSTAL CODE  ANIZATIONAL ID #, if any                                      | SUFFIX                           |
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| /NE33  | Nutone Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  3a. ORGANIZATION'S N  Alagasco  3b. INDIVIDUAL'S LAST   | ORGANIZATION DEBTOR  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME OF NAME OF NAME)   | LEGAL NAME - insert only one of the control of the  | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)  FIRST NAME  CITY                           | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| TO 1   |  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  3a. ORGANIZATION'S N  Alagasco  3b. INDIVIDUAL'S LAST  MAILING ADDRESS  | ORGANIZATION DEBTOR  R'S EXACT FULL  AME  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME of IAME)  NAME  | 2e. TYPE OF ORGANIZATION  of TOTAL ASSIGNEE of ASSIGNOF  | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)  FIRST NAME  CITY                           | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| RESS CITY STATE POSTAL CODE  | 4. This FINANCING STATEMENT covers the following collateral:  Nutone Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST   | ORGANIZATION DEBTOR  R'S EXACT FULL  AME  NAME  ADD'L INFO RE  | LEGAL NAME - insert only one o   | lebtor name (2a or 2b) - do not abbreviate or co   | ombine names  MIDDLE  STATE                          | NAME POSTAL CODE   | }                                |
| /NE33  | Nutone Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  3a. ORGANIZATION'S N  Alagasco  3b. INDIVIDUAL'S LAST   | ORGANIZATION DEBTOR  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME OF NAME OF NAME)   | LEGAL NAME - insert only one of the control of the  | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)  FIRST NAME  CITY                           | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| TO 1   |  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  SECURED PARTY'S  3a. ORGANIZATION'S N  Alagasco  3b. INDIVIDUAL'S LAST  MAILING ADDRESS   | ORGANIZATION DEBTOR  R'S EXACT FULL  AME  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME of IAME)  NAME  | 2e. TYPE OF ORGANIZATION  of TOTAL ASSIGNEE of ASSIGNOF  | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)  FIRST NAME  CITY                           | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| ard Arrington Jr Blvd N  Birmingham  AL 35203  US  |  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  3a. ORGANIZATION'S N  Alagasco  3b. INDIVIDUAL'S LAST  MAILING ADDRESS  605 Richard Arris   | ORGANIZATION DEBTOR  R'S EXACT FULL AME  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME OF NAME OF NAME)  NAME  NAME  NAME   | LEGAL NAME - insert only one of the control of total assigned of assignor of total assigned of the control of total assigned on the control of the control of total assigned on the control of the control of total assigned on the control of the control of total assigned on the control of the control of total assigned on the control of the control of total assigned on the control of the control of total assigned on the control of t | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)  FIRST NAME  CITY                           | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| ard Arrington Jr Blvd N  Birmingham  AL 35203  US  IG STATEMENT covers the following collateral:   | Coil - Model #C6BH-X36CB Serial #C6D110205183  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  Alagasco  3b. INDIVIDUAL'S LAST  MAILING ADDRESS  605 Richard Arriv  This FINANCING STATEM  | ORGANIZATION DEBTOR  R'S EXACT FULL  AME  NAME  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME of IAME)  NAME  NAME  NAME  NAME  NAME  | LEGAL NAME - insert only one of the control one of  | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  8 S/P) - insert only one secured party name (3a)  FIRST NAME  CITY  Birmingham               | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| ard Arrington Jr Blvd N  Birmingham  AL 35203  US  IG STATEMENT covers the following collateral:   |  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  3a. ORGANIZATION'S N  Alagasco  3b. INDIVIDUAL'S LAST  MAILING ADDRESS  605 Richard Arrin  This FINANCING STATEM                  | ORGANIZATION DEBTOR  R'S EXACT FULL  AME  NAME  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME of IAME)  NAME  NAME  NAME  NAME  NAME  | LEGAL NAME - insert only one of the control one of  | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  8 S/P) - insert only one secured party name (3a)  FIRST NAME  CITY  Birmingham               | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| ard Arrington Jr Blvd N  Birmingham  AL  35203  US  Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426   |  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  3a. ORGANIZATION'S N  Alagasco  3b. INDIVIDUAL'S LAST  MAILING ADDRESS  605 Richard Arriv  This FINANCING STATEM  Nutone Cond. Ut | ORGANIZATION DEBTOR  R'S EXACT FULL AME  NAME  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME of IAME)  NAME  NAME | LEGAL NAME - insert only one of the control of total assigned of assignor of total assigned of assignor only one of total assigned on the control o | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)  FIRST NAME  CITY  Birmingham  NSF110100426 | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| ard Arrington Jr Blvd N  Birmingham  AL 35203  US  GRATEMENT covers the following collateral:  Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426  |  | 2a. ORGANIZATION'S N 2b. INDIVIDUAL'S LAST  MAILING ADDRESS  Alagasco 3b. INDIVIDUAL'S LAST  MAILING ADDRESS  605 Richard Arriv This FINANCING STATEM  Nutone Cond. Ut                          | ORGANIZATION DEBTOR  R'S EXACT FULL AME  NAME  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME of IAME)  NAME  NAME | LEGAL NAME - insert only one of the control of total assigned of assignor of total assigned of assignor only one of total assigned on the control o | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)  FIRST NAME  CITY  Birmingham  NSF110100426 | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| ard Arrington Jr Blvd N  Birmingham  AL 35203  US  Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426  |  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  SECURED PARTY'S  3a. ORGANIZATION'S N  Alagasco  3b. INDIVIDUAL'S LAST  MAILING ADDRESS  605 Richard Arriv  This FINANCING STATEM  Nutone Cond. Ut | ORGANIZATION DEBTOR  R'S EXACT FULL AME  NAME  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME of IAME)  NAME  NAME | LEGAL NAME - insert only one of the control of total assigned of assignor of total assigned of assignor only one of total assigned on the control o | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)  FIRST NAME  CITY  Birmingham  NSF110100426 | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |
| ard Arrington Jr Blvd N  Birmingham  AL 35203  US  Cond. Unit - Model #NS4BD-036KA Serial #NSF110100426  | \$3500.00  | 2a. ORGANIZATION'S N  2b. INDIVIDUAL'S LAST  MAILING ADDRESS  Alagasco  3b. INDIVIDUAL'S LAST  MAILING ADDRESS  605 Richard Arriv  This FINANCING STATEM  Nutone Cond. Ur                       | ORGANIZATION DEBTOR  R'S EXACT FULL AME  NAME  ADD'L INFO RE ORGANIZATION DEBTOR  S NAME (or NAME of IAME)  NAME  NAME | LEGAL NAME - insert only one of the control of total assigned of assignor of total assigned of assignor only one of total assigned on the control o | FIRST NAME  2f. JURISDICTION OF ORGANIZATION  R S/P) - insert only one secured party name (3a)  FIRST NAME  CITY  Birmingham  NSF110100426 | ombine names  MIDDLE  STATE  a or 3b)  MIDDLE  STATE | NAME  POSTAL CODE  NAME  POSTAL CODE   | SUFFIX                           |

| E ALTEDNIATIVE DECICNATION (if applicable): ILESSEE/LESSOR  | CONSIGNEE/CONSIGNOR         | BAILEE/BAILOR    | SELLER/BUYER       | AG. LIEN | NON-UCC FILING    |
|---|-----------------------------|------------------|--------------------|----------|-------------------|
| <ol> <li>ALTERNATIVE DESIGNATION (if applicable): LESSEE/LESSOR</li> <li>This FINANCING STATEMENT is to be filed (for record) (or recorded) in ESTATE RECORDS. Attach Addendum</li> </ol> |                             | UEST SEARCH REPO | RT(S) on Debtor(s) |          | Debtor 1 Debtor 2 |
| 8. OPTIONAL FILER REFERENCE DATA  | [if applicable] [ADDITIONAL | ree:             | optionali          |          |                   |

20110517000147270 2/2 \$34.25 Shelby Cnty Judge of Probate, AL

## Shelby Cnty Judge of Probate, AL 05/17/2011 12:41:27 PM FILED/CERT UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT 9a. ORGANIZATION'S NAME MIDDLE NAME, SUFFIX FIRST NAME 9b. INDIVIDUAL'S LAST NAME Melanie Nemeth 10. MISCELLANEOUS: THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME SUFFIX MIDDLE NAME FIRST NAME 11b. INDIVIDUAL'S LAST NAME COUNTRY STATE POSTAL CODE CITY 11c. MAILING ADDRESS 11g. ORGANIZATIONAL ID #, if any 11f. JURISDICTION OF ORGANIZATION 11e. TYPE OF ORGANIZATION ADD'L INFO RE **ORGANIZATION** NONE DEBTOR ADDITIONAL SECURED PARTY'S or MASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a, ORGANIZATION'S NAME Total Comfort Heating and Air SUFFIX MIDDLE NAME FIRST NAME 12b. INDIVIDUAL'S LAST NAME COUNTRY POSTAL CODE STATE 12c. MAILING ADDRESS US 35209 AL. Birmingham 225 Oxmoor Circle, Suite 811 13. This FINANCING STATEMENT covers timber to be cut or as-extracted 16. Additional collateral description: collateral, or is filed as a fixture filing. 14. Description of real estate: 4902 Cox Cove Helena, AL 35080-3424 Legal Description Lot 37 Block 1 Plantation South 3<sup>rd</sup> Sector Phase 2 Section 22 Township 20S Range 03W Map Book 13 Map Page 89

Section 22 Township 20S Range 03W
Map Book 13 Map Page 89
Shelby County, Alabama

15. Name and address of a RECORD OWNER of above-described real estate
(if Debtor does not have a record interest):

17. Check only if applicable and check only one box.

Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate

18. Check only if applicable and check only one box.

Debtor is a TRANSMITTING UTILITY
Filed in connection with a Manufactured-Home Transaction — effective 30 years
Filed in connection with a Public-Finance Transaction — effective 30 years