

20110708000198890 1/2 \$.00  
Shelby Cnty Judge of Probate, AL  
07/08/2011 12:10:09 PM FILED/CERT

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

|   |                                 |
|---|---------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER [optional]                              |                                 |
| Phone (800) 331-3282 Fax (818) 662-4141                                     |                                 |
| B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 10656 PRIME ACCEPTAN |                                 |
| CT Lien Solutions<br>P.O. Box 29071<br>Glendale, CA 91209-9071              | 28962016<br><br>ALAL<br>FIXTURE |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

|   |                                   |   |  |
|---|-----------------------------------|---|--|
| 1a. INITIAL FINANCING STATEMENT FILE #<br>20070406000158930 04/06/07 CC AL Shelby   |                                   | 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.<br><input checked="" type="checkbox"/> |  |
| 2. <input checked="" type="checkbox"/> <b>TERMINATION:</b> Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.  |                                   |   |  |
| 3. <input type="checkbox"/> <b>CONTINUATION:</b> Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.   |                                   |   |  |
| 4. <input type="checkbox"/> <b>ASSIGNMENT</b> (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9.  |                                   |   |  |
| 5. <b>AMENDMENT (PARTY INFORMATION):</b> This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes.<br>Also check <u>one</u> of the following three boxes and provide appropriate information in items 6 and/or 7.<br><input type="checkbox"/> <b>CHANGE</b> 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. <input type="checkbox"/> <b>DELETE</b> name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> <b>ADD</b> name: Complete item 7a or 7b. and also item 7c; also complete items 7d-7g (if applicable) |                                   |   |  |
| 6. <b>CURRENT RECORD INFORMATION:</b>   |                                   |   |  |
| 6a. ORGANIZATION'S NAME   |                                   |   |  |
| OR  |                                   |   |  |
| 6b. INDIVIDUAL'S LAST NAME<br>MINIEX  |                                   | FIRST NAME<br>Chad  | MIDDLE NAME<br>SUFFIX  |
| 7. <b>CHANGED (NEW) OR ADDED INFORMATION:</b>   |                                   |   |  |
| 7a. ORGANIZATION'S NAME   |                                   |   |  |
| OR  |                                   |   |  |
| 7b. INDIVIDUAL'S LAST NAME  |                                   | FIRST NAME  | MIDDLE NAME<br>SUFFIX  |
| 7c. MAILING ADDRESS   |                                   | CITY  | STATE<br>POSTAL CODE<br>COUNTRY  |
| 7d. <u>SEE INSTRUCTION</u>  | ADD'L INFO RE ORGANIZATION DEBTOR | 7e. TYPE OF ORGANIZATION  | 7f. JURISDICTION OF ORGANIZATION<br>7g. ORGANIZATIONAL ID #, if any<br><input type="checkbox"/> NONE |
| 8. <b>AMENDMENT (COLLATERAL CHANGE):</b> check only <u>one</u> box.<br>Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> 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 <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment. |  |            |                       |
| 9a. ORGANIZATION'S NAME<br>Prime Acceptance Corp.   |  |            |                       |
| OR  |  |            |                       |
| 9b. INDIVIDUAL'S LAST NAME  |  | FIRST NAME | MIDDLE NAME<br>SUFFIX |

10. OPTIONAL FILER REFERENCE DATA  
28962016 Debtor Name: MINIEX, Chad 620070794

# UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)

• 20070406000158930 04/06/07 CC AL Shelby

12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

12a. ORGANIZATION'S NAME  
Prime Acceptance Corp.

OR

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

13. Use this space for additional information



20110708000198890 2/2 \$.00  
Shelby Cnty Judge of Probate, AL  
07/08/2011 12:10:09 PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Description: LOT 122 ACCORDING TO THE SURVEY OF PHASE ONE HIDDEN CREEK III AS RECORDED IN MAP BOOK 26, PAGE 13, SHELBY COUNTY, ALABAMA RECORDS. APN: 23-5-21-0-006-039-000