OLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] LOIS COOK 662-680-1161					
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	······································				
RENASANT BANK PO BOX 709 TUPELO MS 38802		20110712000201730 1/1 \$29.00 Shelby Cnty Judge of Probate, AL 07/12/2011 08:14:40 AM FILED/CERT			
		THE ABOVE S	PACE IS FO	R FILING OFFICE US	SE ONLY
. INITIAL FINANCING STATEMENT FILE # 20060808000383470		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 respec	ct to security interest(s) of the			ation Statement.
 CONTINUATION: Effectiveness of the Financing Statement identificant continued for the additional period provided by applicable law. 	ified above with respect to secu	rity interest(s) of the Secui	red Party auth	orizing this Continuation	Statement is
Also check one of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations. 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). CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME OVERTION AND ACCES CONDOCS ALL CONDOCS.	ation in items 6 and/or 7.	ETE name. Give record name deleted in item 6a or 6b.	ame 🗂 AE	D name: Complete item m 7c; also complete item	7a or 7b, and also s 7d-7g (if applicable
OVERTON VILLAGE CONDOS LLC OR 66. INDIVIDUAL'S LAST NAME	FIRST NAME	. <u> </u>	MIDDLE NAME SUFFIX		
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME					
7a. ORGANIZATION'S NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
76. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS 2204 LAKESHORE DRIVE, STE 305	CITY BIRMINGHA		STATE	POSTAL CODE 35009	COUNTRY
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME 7c. MAILING ADDRESS	CITY BIRMINGHA TON 7f. JURISDICTION C		STATE	POSTAL CODE	COUNTRY
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME c. MAILING ADDRESS 2204 LAKESHORE DRIVE, STE 305 ADD'L INFO RE 7e. TYPE OF ORGANIZAT ORGANIZATION DEBTOR LIMITED LIABI	CITY BIRMINGHA ION 7f. JURISDICTION COLUMN LITY ALABAMA	OF ORGANIZATION	STATE AL 7g. ORG	POSTAL CODE 35009	COUNTRY USA
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME c. MAILING ADDRESS 2204 LAKESHORE DRIVE, STE 305 ADD'L INFO RE 7e. TYPE OF ORGANIZAT ORGANIZATION DEBTOR LIMITED LIABI 6. AMENDMENT (COLLATERAL CHANGE): check only one box.	BIRMINGHA TION 7f. JURISDICTION OF ALABAMA Collateral description, or description TIS AMENDMENT (name of a	ribe collateral assigned	ment). If this is	an Amendment authorize	COUNTRY USA y