

20110921000279010 1/1 \$29.00 Shelby Cnty Judge of Probate, AL 09/21/2011 12:12:43 PM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Corporation Service Company
801 ADLAI STEVENSON DRIVE
Springfield, IL 62703

GECFS-RAYERREVERSON DRIVE
917557-1

INITIAL FINIANCING OF	ATENIENT EU E 4				R FILING OFFICE USE		
1a. INITIAL FINANCING STATEMENT FILE # 20070103000001460 Date: 01/03/2007 B: P:				1b. This FINANCING STATEMENT AMENDMENT to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.			
TERMINATION: E	Effectiveness of the Fin	nancing Statement identified abov	e is terminated with respect to security interest(s) of			n Statement.	
	Effectiveness of the litional period provided		bove with respect to security interest(s) of the Sec	ured Party auth	orizing this Continuation State	ement is	
ASSIGNMENT (ful	I or partial): Give пап	ne of assignee in item 7a or 7b an	d address of assignee in item 7c; and also give nam	ne of assignor in	item 9.		
		<u> </u>	Debtor <u>or</u> Secured Party of record. Check on n items 6 and/or 7.	ly <u>one</u> of these	two boxes.		
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.			DELETE name: Give record name to be deleted in item 6a or 6b.	ADD also c	ADD name: Complete item 7a or 7b, and also item 7c also complete items 7e-7g (if applicable).		
CURRENT RECORD II	,						
6a. ORGANIZATION'S	NAME				- <u>-</u>		
RAVE MOTION	PICTURES BT	RMINGHAM III, L.1	L.C.				
6b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX		
CHANGED (NEW) OR	ADDED INFORMATI	ION:	I				
7a. ORGANIZATION'S		IOI4.					
R 7b. INDIVIDUAL'S LAST NAME			FIRST NAME	IMIDDI E	MIDDLE NAME SUFFIX		
7 D. HADIAIDORE O EROT IARIAIE							
a MANUNIC ADDRESS							
AAAH ING ADDDEGG		 	OPTS/		TOOCTAL CODE	00114770	
MAILING ADDRESS	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	CITY	STATE	POSTAL CODE	COUNTR	
						COUNTR	
	ADD'L INFO RE ORGANIZATION	7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION		POSTAL CODE ANIZATIONAL ID #, if any	COUNTR	
SEEINSTRUCTIONS AMENDMENT (COLL	ORGANIZATION DEBTOR ATERAL CHANGE	E): check only <u>one</u> box.	7f. JURISDICTION OF ORGANIZATION	7g. ORG			
SEEINSTRUCTIONS AMENDMENT (COLL	ORGANIZATION DEBTOR ATERAL CHANGE	E): check only <u>one</u> box.		7g. ORG			
SEE INSTRUCTIONS AMENDMENT (COLL Describe collateral	ORGANIZATION DEBTOR LATERAL CHANGE added, added, be authorizing Debtor, be authorizing Debtor, and added and added are authorizing Debtor, and added and added are authorized be authorized by the authorized be authorized by the authorized be authorized by the authorized	E): check only <u>one</u> box. or give entire restated colla	7f. JURISDICTION OF ORGANIZATION	ned.	SANIZATIONAL ID #, if any		
SEEINSTRUCTIONS AMENDMENT (COLL Describe collateral	ORGANIZATION DEBTOR LATERAL CHANGE added, added, be authorizing Debtor, be authorizing Debtor, and added and added are authorizing Debtor, and added and added are authorized be authorized by the authorized be authorized by the authorized be authorized by the authorized	E): check only <u>one</u> box. or give entire restated colla	7f. JURISDICTION OF ORGANIZATION teral description, or describe collateral assign MENDMENT (name of assignor, if this is an Assign	ned.	SANIZATIONAL ID #, if any		
NAME OF SECUREI adds collateral or adds the 9a. ORGANIZATION'S	ORGANIZATION DEBTOR ATERAL CHANGE added, added, be authorizing Debtor, NAME	E): check only <u>one</u> box. or give entire restated colla	7f. JURISDICTION OF ORGANIZATION teral description, or describe collateral assign MENDMENT (name of assignor, if this is an Assigned by a Debtor, check here and enter name of I	ned.	SANIZATIONAL ID #, if any	a Debtor wi	

10. OPTIONAL FILER REFERENCE DATA

AL-Shelby County Probate Court