	20111005000295340 1/1 \$29.00 20101005000295340 1/1 \$29.00 Shelby Cnty Judge of Probate, AL 10/05/2011 10:50:50 AM FILED/CERT				
UCC FINANCING STATEMENT AMENDME! FOLLOW INSTRUCTIONS (front and back) CAREFULLY	NT				
A. NAME & PHONE OF CONTACT AT FILER [optional]  John L. Hartman, III 205-879-0500					
B. SEND ACKNOWLEDGMENT TO: (Name and Address)					
John L. Hartman, III Hartman & Springfield P. O. Box 846 Birmingham, AL 35201-0846					
		THE ADOVE CO	ACC IC E	OT THE INCOMPANY	re Asci V
1a. INITIAL FINANCING STATEMENT FILE # 20070430000199430 and 20110302000070470		THE ABOVE SP	1b. Th	OR FILING OFFICE US is FINANCING STATEME be filed (for record) (or re-	NT AMENDMENT I
TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to s	ecurity interest(s) of the		EAL ESTATE RECORDS.  arty authorizing this Termin	nation Statement.
CONTINUATION: Effectiveness of the Financing Statement identified ab			****		
continued for the additional period provided by applicable law.  ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and					
CHANGE name and/or address: Give current record name in item 6a or 6b; all name (if name change) in item 7a or 7b and/or new address (if address change). CURRENT RECORD INFORMATION:  6a. ORGANIZATION'S NAME  NSH Corp.  6b. INDIVIDUAL'S LAST NAME	e) in item 7c to be dek	name: Give record name ted in item 6a or 6b.	it	DD name: Complete item em 7c; also complete item	7a or 7b, and also s 7d-7g (if applicab
OU INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
7a. ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·		·=····································	
76. INDIVIDUAL'S LAST NAME	FIRST NAME	·- · · · · · · · · · · · · · · · · · ·	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS	Catv	**************************************	07175		2011
	CITY		STATE	POSTAL CODE	COUNTRY
ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	71. JURISDICTION OF OR	GANIZATION	7g. ORG	ANIZATIONAL ID #, if any	γ
DEBTOR  AMENDMENT (COLLATERAL CHANGE): check only one box.				<del></del>	NO
PARTIAL RELEASE:  Lot 23, according to the E of Southpointe Ridge as rein the Probate Office of S	Final Plat of corded in Plat of the Plat o	of Reside Map Book ty, Alaba	entia 39, ma.	Page 7,	
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM adds collateral or adds the authorizing Debtor, or it this is a Termination authorized	ENDMENT (name of assigno by a Debtor, check here	r, if this is an Assignment and enter name of DEB	nt). If this is TOR autho	an Amendment authorized orizing this Amendment.	d by a Debtor which
9a. ORGANIZATION'S NAME  Compass Bank					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	<u> </u>	MIDDLE	NANC	GUEEIY

FIRST NAME

MIDDLE NAME

SUFFIX

10, OPTIONAL FILER REFERENCE DATA

Judge of Probate, Shelby County