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	C FINANCING S LOW INSTRUCTIONS (fr			NT					
A. NAME & PHONE OF CONTACT AT FILER [optional] Phone (800) 331-3282 Fax (818) 662-4141									
. SI	ND ACKNOWLEDGEMENT TO:	(Name and Mailing Address)	14954 GRANI	DBRIDGE RE					
	CT Lien Solutions P.O. Box 29071 Glendale, CA 9120	na_an71	3010840 ALAL	02	20111005000 20111005000 Shelby Cnty	296080 1/ Judge 0	3080 1/2 \$29.00 udge of Probate, AL :25:11 PM FILED/CERT		
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. II	NITIAL FINANCING STATEM 20070312000109680	IENT FILE # 03/12/07 CC AL Sh	nelby			1b. Th X to	is FINANCING STATEMEN be filed [for record] (or recore EAL ESTATE RECORDS.	T AMENDMENT is ded) in the	
	X CONTINUATION: Effective	eness of the Financing Statem eness of the Financing Statem riod provided by applicable law	ent identified above						
	ASSIGNMENT (full or part	ial): Give name of assignee	in item 7a or 7b	and address of ass	ignee in 7c; and also gi	ve name of	assignor in item 9.		
/ C <u>l</u>	MENDMENT (PARTY INFORMATION IN	three boxes a <u>nd provide</u> as: Give current record name in 7a or 7b and/or new address (ppropriate infornitem 6a or 6b; also	nation in items 6 and give new	Party of record. Check only //or 7. ELETE name: Give record to the deleted in item 6a or 6b	name 🦳	ADD name: Complete item item 7c; also complete item		
119 Partners I, LLC				FIRST NAME	<u> </u>	MIDDLE	MIDDLE NAME SUFFIX		
	Bb. INDIVIDUAL'S LAST NAME					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
-	HANGED (NEW) OR ADDED 7a. ORGANIZATION'S NAME	INFORMATION:	· · · · · · · · · · · · · · · · · · ·						
7b. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE NAME		SUFFIX		
c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY		
. <u>s</u>	i	NFO RE 7e. TYPE OF O	RGANIZATION	7f. JURISDICTION (F ORGANIZATION	7g. ORG	SANIZATIONAL ID #, if any	NON	
	MENDMENT (COLLATERAL			eral description, or de	scribe collateral assi	gned.			
	AME OF SECURED PARTY (F RECORD AUTHORIZIN	G THIS AMEND	MENT (name of assic	nor, if this is an Assignmen	nt). If this is a	n Amendment authorized by	a Debtor which	
N	adds collateral or adds the authorized. ORGANIZATION'S NAME	zing Debtor, or if this is a Termi	nation authorized b				orizing this Amendment.		
į	A		P1 P2 P2 P2 P2 P						
r R	American Equity Investr	nent Lite Insurance Cor	npany	FIRST NAME	<u>,, , , , , , , , , , , , , , , , , , ,</u>	MIDDLE	NAME	SUFFIX	

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20070312000109680 03/12/07 CC AL Shelby 12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME American Equity Investment Life Insurance Company 10b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

20111005000296080 2/2 \$29.00 Shelby Cnty Judge of Probate, AL 10/05/2011 01:25:11 PM FILED/CERT

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Description: Lot 2A, according to the Resurvey of Lot 2 of John Bell's Addition to Hoover, as recorded in Map Book 29, Page 86, in the Probate Office of Shelby County, Alabama; being situated in Shelby County, Alabama.