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	SUFFIX		
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14. INITIAL FINANCING STATE	VENT FILE # (same as item 1a on Amendo	nent form)
20080618000249540	(AL-Shelby County Probate Co	ourt)
15a. ORGANIZATION'S NAME Fundamental Advisors I	P, as Agent for Fundamental Parts	
15b. INDIVIDUAL'S LAST NAME		MIDDLE NAME, SUFFIX

20120120000023910 2/2 \$29.00
Shelby Cnty Judge of Probate, AL
01/20/2012 10:31:29 AM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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17a. ORGANIZATION'S		- CEOLIE LALMANE - BISSICALIÀ ALIO				
OR 17b. INDIVIDUAL'S LAST NAME 17c. MAILING ADDRESS		FIRST NAME	MIDDLE NAME		SUFFIX	
		CITY	STATE	POSTAL CODE	COUNTRY	
17d. SEE INSTRUCTIONS ADD'L INFO RE 17e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR		17f. JURISDICTION OF ORGANIZATION	17g. ORGANIZATIONAL ID #, if any		NONE	
18. ADDITIONAL DEBTO		L LEGAL NAME - insert only one	name (18a or 18b) - do not abbreviate or combine	names		
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18d. SEE INSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	18e. TYPE OF ORGANIZATION	18f. JURISDICTION OF ORGANIZATION	18g. ORGANIZATIONAL ID #, if any		
19a. ORGANIZATION'S	NAME	L LEGAL NAME - insert only <u>one</u>	name (19a or 19b) - do not abbreviate or combine			SUFFIX
19b. INDIVIDUAL'S LAS	19b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		
19c. MAILING ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
19d. SEEINSTRUCTIONS	ADD'L INFO RE ORGANIZATION DEBTOR	19e. TYPE OF ORGANIZATION	19f. JURISDICTION OF ORGANIZATION	19g. ORGANIZATIONAL ID #, if any		
20. ADDITIONAL SECUI 20a. ORGANIZATION'S		IAME (or Name of TOTAL ASSIGN	EE) - insert only <u>one</u> name (20a or 20b)			<u></u>
OR Fundamental Advisors LP as Agent for Fundamental Partners 20b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		SUFFIX	
20c. MAILING ADDRESS		CITY	STATE POSTAL CODE		COUNTRY	
745 Fifth Avenue, 30th Floor			New York	NY	10151	USA
21. ADDITIONAL SECU 21a. ORGANIZATION'S		IAME (or Name of TOTAL ASSIGN	EE) - insert only <u>one</u> name (21a or 21b)	<u></u>		
Fundamental Advisors LP as Agent for Fundamental Partne		ers (Tax-Exempt) LP	MIDDLE NAME SU		SUFFIX	
ZIU. INUIVIUUAL S LAS	21b. INDIVIDUAL'S LAST NAME					
21c. MAILING ADDRESS		<u> </u>	CITY	STATE	POSTAL CODE	COUNTRY
745 Fifth Avenue, 30th Floor			New York	NY	10151	USA