A. NAME & PHONE OF CONTACT AT FILER [optional] Onya Tarbert 226.1402					
3. SEND ACKNOWLEDGMENT TO: (Name and Address)		20120423000139970 1/2 \$.00 20120423000139970 1/2 \$.00			
Alabama Power Company		2012042300 Shelby Cnt	0013 ty J	gg70 1/2 \$.00 udge of Probate	, AL /CERT
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. INITIAL FINANCING STATEMENT FILE#		THE ABOVE SPAC	EISF	OR FILING OFFICE U	ISE ONLY
20091118000428500/Shelby			1b. This FINANCING STATEMENT AMENDMENT to be filed [for record] (or recorded) in the		
X TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to sec		security interest(s) of the Sec	I REAL ESTATE RECORDS, Iv interest(s) of the Secured Party authorizing this Taxadantian Date.		
CONTINUATION: Effectiveness of the Financing Statem continued for the additional period provided by applicable la	nent identified above with respect to security aw.	interest(s) of the Secured Pa	irty au	thorizing this Continuation	Statement is
ASSIGNMENT (full or partial): Give name of assignee in i	item 7a or 7b and address of assignee in item	7c: and also give game of one			
This Amendme	ent affects Debtor or Secured Party	of record. Check only one of			·
Also check one of the following three boxes and provide appropris	ate information in Items 6 and/or 7.	OF FECURE. CITECK OILLY DIE	n mes	e two boxes.	
CHANGE name and/or address: Give current record name in name (if name change) in item 7a or 7b and/or new address (item 6a or 6b; also give new (if address change) in item 7c. to be de	name: Give record name eleted in item 6a or 6b.		ADD name: Complete iten tem 7c; also complete iten	n 7a or 7b, and also
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME				tom ro, oldo complete item	is 70-79 (ii applica
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	N	MIDDLI	E NAME	Lenger
Forster	Michael	(٦.	<i></i>	SUFFIX
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME			4.6.000.000 ,		
A CONTRACTOR O TAVINE					
76. INDIVIDUAL'S LAST NAME	FIRST NAME	16.7	(IDD)	T 41/4/F"	
		IV	יוטטני	ENAME	SUFFIX
AAILING ADDRESS	CITY	S	TATE	POSTAL CODE	COUNTRY
49 Treymoon Lake Circle	Alabaster		AL	35203	US
TAX ID A SSN DR EN TADDS INCA OF IN HURR AFTER	GANIZATION 71. JURISDICTION OF OF	RGANIZATION 70	g. OR	GANIZATIONAL ID #, if an	y
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UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20091118000428500/Shelby 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR Alabama Power Company IZB. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

13. Use this space for additional information

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