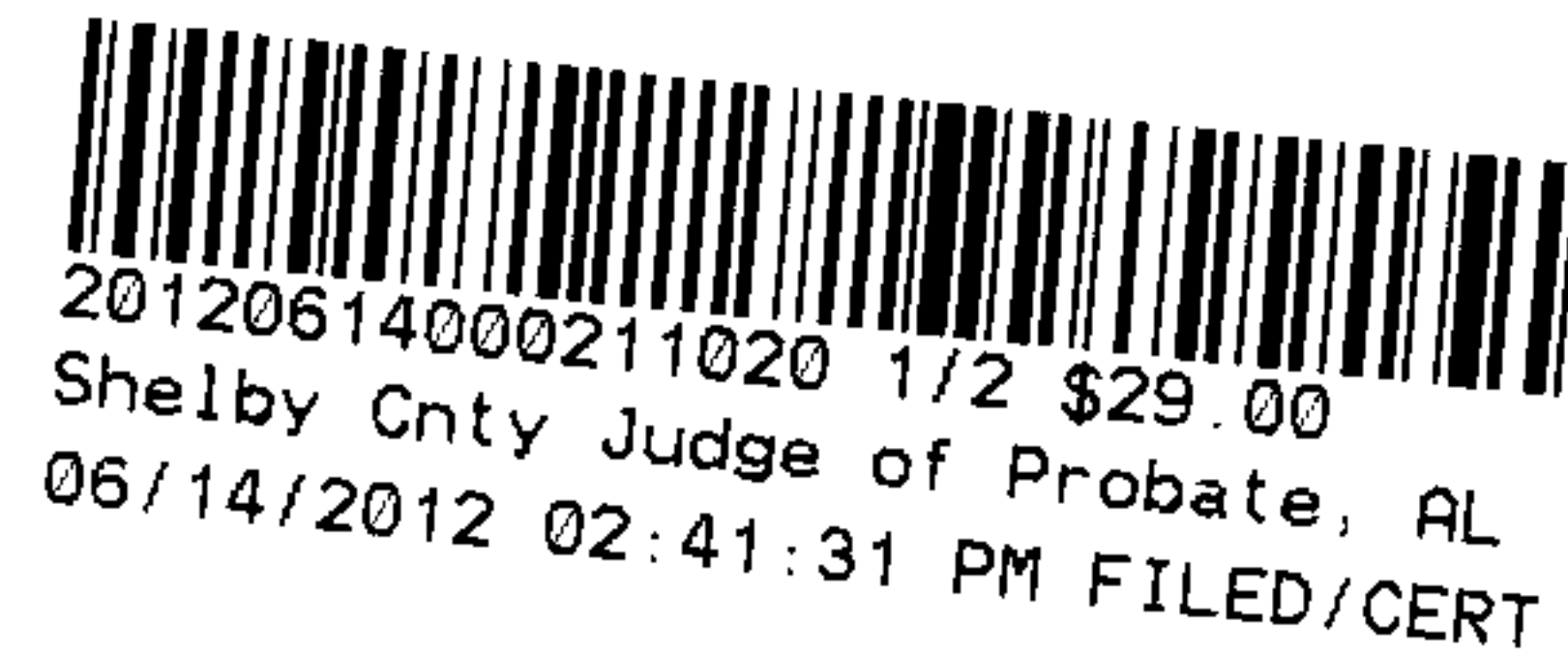


# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

|                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER [optional]<br>Tonya Tarbert 226.1402                                            |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address)<br><br>Alabama Power Company<br>600 18th St N<br>Birmingham, AL 35203 |



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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| 1a. INITIAL FINANCING STATEMENT FILE #<br>20070719000338250                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.<br><input type="checkbox"/> |
| 2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                          |
| 3. <input checked="" type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                          |
| 4. <input type="checkbox"/> ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                          |
| 5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes.<br>Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in items 6 and/or 7.<br><input type="checkbox"/> CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable). |                                                                                                                                          |
| 6. CURRENT RECORD INFORMATION:<br>6a. ORGANIZATION'S NAME<br>OR<br>6b. INDIVIDUAL'S LAST NAME<br>Kaefer<br>FIRST NAME<br>Susan<br>MIDDLE NAME<br>M.<br>SUFFIX                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                          |
| 7. CHANGED (NEW) OR ADDED INFORMATION:<br>7a. ORGANIZATION'S NAME<br>OR<br>7b. INDIVIDUAL'S LAST NAME<br>Kaefer<br>FIRST NAME<br>Ronald<br>MIDDLE NAME<br>Wayne<br>SUFFIX<br>Jr<br>7c. MAILING ADDRESS<br>84 Highway 223<br>CITY<br>Montevallo<br>STATE<br>AL<br>POSTAL CODE<br>35115<br>COUNTRY<br>US<br>7d. TAX ID #: SSN OR EIN<br>ADD'L INFO RE ORGANIZATION DEBTOR<br>7e. TYPE OF ORGANIZATION<br>7f. JURISDICTION OF ORGANIZATION<br>7g. ORGANIZATIONAL ID #, if any<br><input type="checkbox"/> NONE                                                                                                                                                                                                                             |                                                                                                                                          |
| 8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box.<br>Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned.                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                          |

|                                                                                                                                                                                                                                                                                                                                                               |                            |            |                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------|-----------------------|
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment. |                            |            |                       |
| 9a. ORGANIZATION'S NAME<br>Alabama Power Company                                                                                                                                                                                                                                                                                                              |                            |            |                       |
| OR                                                                                                                                                                                                                                                                                                                                                            | 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME<br>SUFFIX |

10. OPTIONAL FILER REFERENCE DATA

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

|                                                                            |
|----------------------------------------------------------------------------|
| 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) |
| 20070719000338250                                                          |

|                                                                                 |
|---------------------------------------------------------------------------------|
| 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) |
| 12a. ORGANIZATION'S NAME                                                        |
| Alabama Power Company                                                           |
| OR                                                                              |
| 12b. INDIVIDUAL'S LAST NAME                                                     |
| FIRST NAME                                                                      |
| MIDDLE NAME,SUFFIX                                                              |

|                                               |
|-----------------------------------------------|
| 13. Use this space for additional information |
|-----------------------------------------------|

20120614000211020 2/2 \$29.00  
Shelby Cnty Judge of Probate, AL  
06/14/2012 02:41:31 PM FILED/CERT

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