UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Corporation Service Company 1-800-858-5294 B. SEND ACKNOWLEDGMENT TO: (Name and Address) 68823855 - 363950 Corporation Service Company 08/15/2012 03:25:06 PM FILED/CERT 801 Adlai Stevenson Drive Springfield, IL 62703-4261 Filed In: Alabama Shelby THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY I, DEBTOR'S EXACT FULL LEGAL NAME-insert only <u>one</u> debtor name (1a or 1b)-do not abbreviate or combine names 1a. ORGANIZATION'S NAME 1Ь. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME ALVA GIVENS CITY STATE 1c. MAILING ADDRESS 2099 VILLAGE LN CALERA AL 1e. TYPE OF ORGANIZATION 1g. ORGANIZATIONAL ID #, if any 1f. JURISDICTION OF ORGANIZATION ADD'L INFO RE 1d. SEE INSTRUCTIONS **ORGANIZATION** DEBTOR 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S LAST NAME MIDDLE NAME FIRST NAME **JIMMY** GIVENS 2c. MAILING ADDRESS 2099 VILLAGE LN STATE CITY CALERA AL ADD'L INFO RE | 2e. TYPE OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any 2f. JURISDICTION OF ORGANIZATION 2d. SEE INSTRUCTIONS **ORGANIZATION** DEBTOR 3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b) 3a. ORGANIZATION'S NAME Preferred Credit, Inc

SUFFIX

COUNTRY

NONE

USA

SUFFIX

COUNTRY

NONE

USA

SUFFIX

COUNTRY

USA

POSTAL CODE

POSTAL CODE

POSTAL CODE

56301

35040

MIDDLE NAME

STATE

MN

35040

4. This FINANCING STATEMENT covers the following collateral:

Purchase money security interest in...

Amount of indebtedness \$4400.00

3b. INDIVIDUAL'S LAST NAME

3c. MAILING ADDRESS

Property Value: \$136000.00

RAINSOFT WATER TREATMENT SYSTEM SERIAL#1275597

3051 2nd St So, #200

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR	CONSIGNEE/CONSIG	NOR BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
This FINANCING STATEMENT is to be filed [for record] (or recorded) ESTATE RECORDS. Attach Addendum	in the REAL 7. Check [if applicable] [ADDI	to REQUEST SEARCH REPO	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA :02158506GIVENS,	ALVA				
					68823855

FIRST NAME

St. Cloud

CITY

FOLLOW INSTRUCTIONS (front and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT										
J . 1	9a. ORGANIZATION'S NA									
OR										
OK	9b. INDIVIDUAL'S LAST	NAME	FIRST NAME	P	MIDDLE NAME, SUFFIX					
	GIVENS		ALVA		J				li1	
10.	MISCELLANEOUS:									
							003034	70 2/2 \$37.60		
								70 2/2 \$37.60 ge of Probate, AL	. 	
						08/15/201	2 03:2	5:06 PM FILED/CER	L	
						THE ABOVE	SPACE	IS FOR FILING OFFICE	E USE O	NLY
11.	ADDITIONAL DEBTO	R'S EXACT FUL	L LEGAL NAME - insert only one	name (11	a or 11b) - do not abbrevi	ate or combine nam	es			
	11a. ORGANIZATION'S N	IAME				•				
OR				·· T			1 =		1	-1
0, (11b. INDIVIDUAL'S LAST	NAME		FIRST	FIRST NAME		MIDDLE NAME		SUFFIX	
			· · · · · · · · · · · · · · · · · · ·	0.77			CTATE	DOCTAL CODE	00011	WITDY
1 1 c	, MAILING ADDRESS			CITY			STATE	POSTAL CODE	COU	NIRY
114	SEEINSTRUCTIONS	ADD'L INFO RE	11e. TYPE OF ORGANIZATION	11f JU	RISDICTION OF ORGAN	NIZATION	11a, OR	 GANIZATIONAL ID #, if any		·
110	. <u>SEETHOTICOTION</u>	ORGANIZATION	1	1			1			NONE
42	ADDITIONAL SEC	DEBTOR	'S or ASSIGNOR S/P'S	S NIAME	incort only one name	(125 or 12b)	<u>. i</u>			INONE
12.	12a, ORGANIZATION'S N		O DI LINOSIOITOITOITO	J INCIPIL	msert only <u>one</u> name	(124 01 120)				
OR	12b. INDIVIDUAL'S LAST	12b. INDIVIDUAL'S LAST NAME		FIRST	FIRST NAME		MIDDLE NAME		SUFF	TIX
12c. MAILING ADDRESS			CITY	CITY		STATE	POSTAL CODE	COU	NTRY	
			· · · · · · · · · · · · · · · · · · ·							
	This FINANCING STATE		mber to be cut or as-extracted	16. Ad	iditional collateral descri	ption:				
	collateral, or is filed as a Description of real estate:									
	EGAL DESCRIPTION									
	OT 226 BOOK/PG 3		O							
	D VILLAGE SECTOR PN: 22-7-35-2-007-0									
/ \	14. 22 7 00 2 007 0	10 000								
SI	HELBY COUNTY AL	•								
15.	Name and address of a R	ECORD OWNER of	above-described real estate							
	(if Debtor does not have a	record interest):								
	VA J GIVENS									
	MMY K GIVENS			17. Ch	eck <u>only</u> if applicable an	d check <u>only</u> one bo	x.			
CALERA AL 30040			Debtor	is a Trust or T	rustee acting with re	espect to p	roperty held in trust or	Decedent	r's Estate	
			18. Check <u>only</u> if applicable and check <u>only</u> one box.							
			De	Debtor is a TRANSMITTING UTILITY						
				File	ed in connection with a M	Manufactured-Home	Transactio	n — effective 30 years		
			III I Fili	Filed in connection with a Public-Finance Transaction effective 30 years						