UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] B. SEND ACKNOWLEDGMENT TO: (Name and Address)	11244 DGC	o Lingu C	
Loan Department, Central State Bank P.O. Box 180 Calera, Alabama 35040		Alabama Sec. Of St B 12-034614 Date 6/25/ Time 1	Exton Acton Form
1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one de		VE SPACE IS FOR FILING OFFICE USE Of ombine names	NLY
1a. ORGANIZATION'S NAME			
OR AHSAN, LLC 1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
1c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
2106 ARBOR HILL PARKWAY 1d. TAX ID #: SSN OR EIN ADD'L INFO RE 1e. TYPE OF ORGANIZ	HOOVER ATION 1f. JURISDICTION OF ORGANIZATION	AL 35244 1g. ORGANIZATIONAL ID #, if any	USA
ORGANIZATION Limited Liability Company			X NONE
2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - inse	rt only <u>one</u> debtor name (2a or 2b) - do not a	bbreviate or combine names	
2a. ORGANIZATION'S NAME		•	
OR 26. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
2c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZ ORGANIZATION DEBTOR	ATION 2f. JURISDICTION OF ORGANIZATION	2g. ORGANIZATIONAL ID #, if any	☐ NONE
3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of A	ASSIGNOR S/P) - insert only <u>one</u> secured party name (3	3a or 3b)	
Central State Bank			
OR 3b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
3c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
11025 Highway 25	Calera	AL 35040	USA
accessories, repairs, replacements, improvements, but not limited to, machinery, vehicles, furniture, equipment, office and record keeping equipment, packedule Debtor gives to Secured Party, but such a	fixtures, manufacturing equipment, for parts, and tools. The property includes	d: EQUIPMENT: All equipment farm machinery and equipment, so les any equipment described in a fect a valid security interest in al	nt including, shop list or

NAME OF FIRST DEBTOR (1a or 1b)	ON RELATED FINANCING STATE	MENT			
9a. ORGANIZATION'S NAME					
OR AHSAN, LLC					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
O. MISCELLANEOUS:					
			2012090 Shelby	6000336860 2/2 \$	29 . 00
			09/06/2	Onty Judge of Pro	bate, AL
					TEDICEKI
			THE AROVE SDACE	IS FOR FILING OFFIC	E LISE ONLY
1. ADDITIONAL DEBTOR'S EXACT F	THE LEGAL NAME - insert only	one name (11a or 11b) - do not		فالتحافظ فالمناف والمستدين والمستدين والمستدين والمستدين والمستدين والمستدين والمستدين والمستدين والمستدين	
11a. ORGANIZATION'S NAME	OLL CLUME TAXIAL INSUIT ONLY	ONIO TIGITIO (TTO OT TTO)			
OR 11b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
1c. MAILING ADDRESS	1''	CITY	STATE	POSTAL CODE	COUNTRY
1d. TAX ID #: SSN OR EIN ADD'L INFO R		11f. JURISDICTION OF ORGANIZA	TION 11g. OF	GANIZATIONAL ID #, if	any
ORGANIZATION DEBTOR					X NC
2 ADDITIONAL SECURED PAR	TY'S or ASSIGNOR S/	P'S NAME - insert only <u>one</u> nar	ne (12a or 12b)		
12a. ORGANIZATION'S NAME				······································	
OR					
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
3. This FINANCING STATEMENT covers	timber to be cut or as-extracte	d 16. Additional collateral description	:	· · · · · · · · · · · · · · · · · · ·	
collateral, or is filed as a χ fixture filin	ng.				
4. Description of real estate:					
Name and address of a RECORD OWNER	of above-described real estate				
(if Debtor does not have a record interest					
		47 Object 1 14 15 15 15 15 15 15 15 15 15 15 15 15 15			
		17. Check only if applicable and ch		r	-
		Debtor is a Trust or Truste		property held in trust or L	□ Decedent's Est □ Decedent's Est
		<u> </u>	eck <u>only</u> one box.		

Debtor is a TRANSMITTING UTILITY

Filed in connection with a Manufactured-Home Transaction -- effective 30 years

Filed in connection with a Public-Finance Transaction -- effective 30 years