A. NAME & PHONE OF College Armstrong 2	MENT TO: (Name and Address) ver Company	ENT	Shelb	เขาใชยปร yy Cnty	90950 1/2 \$.00 Judge of Probate, 0:55:28 AM FILED/	AL CERT
A INITIAL EINIANCING STAT			THE ABOVE SP		OR FILING OFFICE US	
a. INITIAL FINANCING STAT	20090825000326130			r to	is FINANCING STATEMEN be filed [for record] (or record AL ESTATE RECORDS.	
. X TERMINATION: Effe	ectiveness of the Financing Statement identified at	ove is terminated with respect to s	ecurity interest(s) of the			tion Statement.
. CONTINUATION: E continued for the addition	ffectiveness of the Financing Statement identified onal period provided by applicable law.	d above with respect to security in	terest(s) of the Secure	d Party auth	orizing this Continuation S	tatement is
. ASSIGNMENT (full o	r partial): Give name of assignee in item 7a or 7b	and address of assignee in item 7	c; and also give name o	of assignor in	item 9.	
	INFORMATION): This Amendment affects					
	ring three boxes and provide appropriate information					
name (if name change)	address: Give current record name in item 6a or 6 in item 7a or 7b and/or new address (if address ch	b; also give new DELETE to be dele	name: Give record name ted in item 6a or 6b.	ne A ite	DD name: Complete item 7 em 7c; also complete items	a or 7b, and also 7d-7g (if applica
CURRENT RECORD INF						······································
6b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME SUFFIX		SUFFIX
Hendrix	Hendrix		Jessica			:
CHANGED (NEW) OR AL						
7a. ORGANIZATION'S N	<b>AME</b>					•
7b. INDIVIDUAL'S LAST NAME		IFIRST NAME	FIRST NAME		MIDDLE NAME SUFFIX	
Hendrix		Ashley		Н		
. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
1403 Belmont Ln		Helena		AL	35080	US
TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR I		7f. JURISDICTION OF ORGANIZATION		7g. ORGANIZATIONAL ID #, if any		
I AA IU #: SSN OK EIN				·		
	TERAL CHANGE): check only one box.					
AMENDMENT (COLLA	TERAL CHANGE): check only one box.  sted or added, or give entire restated co	llateral description, or describe co	ollateral assigned.			
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AMENDMENT (COLLA) Describe collateral dele	PARTY OF RECORD AUTHORIZING THIS	AMENDMENT (name of assigno	or, if this is an Assignme	ent). If this is	an Amendment authorized	by a Debtor wh
AMENDMENT (COLLA) Describe collateral dele	PARTY OF RECORD AUTHORIZING THIS outhorizing Debtor, or if this is a Termination authorizing Debtor.	AMENDMENT (name of assigno	or, if this is an Assignme	ent). If this is	an Amendment authorized prizing this Amendment.	by a Debtor w
AMENDMENT (COLLA) Describe collateral dele	PARTY OF RECORD AUTHORIZING THIS uthorizing Debtor, or if this is a Termination autho	AMENDMENT (name of assigno	or, if this is an Assignme	ent). If this is	an Amendment authorized prizing this Amendment.	by a Debtor w
AMENDMENT (COLLA) Describe collateral dele	PARTY OF RECORD AUTHORIZING THIS uthorizing Debtor, or if this is a Termination authorizing Company	AMENDMENT (name of assigno	or, if this is an Assignme	ent). If this is	orizing this Amendment.	by a Debtor w

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) 20090825000326130 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX 13. Use this space for additional information

20121011000390950 2/2 \$.00 Shelby Cnty Judge of Probate, AL 10/11/2012 10:55:28 AM FILED/CERT

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