UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY	
A. NAME & PHONE OF CONTACT AT FILER [optional]	
Heather Ward (205) 328-4600	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
Heather E. Ward ENGEL HAIRSTON & JOHANSON, P.C. P.O. Box 11405 Birmingham, Alabama, 35202	

Shelby Cnty Judge of Probate, AL 11/02/2012 12:48:04 PM FILED/CERT

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				THE ABOVE	SPACE IS FU	K FILING OFFICE US	SEUNLT	
1. DE	BTOR'S EXACT FU	JLL LEGAL NAME	E - insert only <u>one</u> debtor name (1a	or 1b) - do not abbreviate or combine names				
	ORGANIZATION'S NA							
<i> </i>	Alabaster Eye	Care, Inc.						
OR 1b.	1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		SUFFIX		
40 14011	LINO ADDDESS			CITY	STATE	POSTAL CODE	COUNTRY	
1c. MAILING ADDRESS 2344 Dalton Drive				1				
			Pelham	AL	35124	USA		
14: 1751 12 11: 0011 011 4111		1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any				
		ORGANIZATION DEBTOR	Corporation	Alabama			COUNTRY USA SUFFIX COUNTRY	
2. ADD	ITIONAL DEBTOR	R'S EXACT FULL	LEGAL NAME - insert only one of	debtor name (2a or 2b) - do not abbreviate or con	nbine names			
2a.	ORGANIZATION'S NA	ME						
OR 2b	. INDIVIDUAL'S LAST N	VAME	<u>-</u>	FIRST NAME	MIDDLE NAME		SUFFIX	
	ZD. HADIAIDONEO ENOT HAMIL							
						DOCTAL CODE	COLINEEDY	
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY			
2d. TAX ID #: SSN OR EIN ADD'L INFO RE 2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION	2g. ORG	· · · · · · · · · · · · · · · · · · ·				
		ORGANIZATION DEBTOR	<u> </u>	' 			NONE	
3. SEC	CURED PARTY'S	NAME (or NAME of	of TOTAL ASSIGNEE of ASSIGNOR	R S/P) - insert only one secured party name (3a o	r 3b)			
3a.	. ORGANIZATION'S NA	ME						
	CENTRAL STA	ATE BANK						
OR 3h	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		ISUFFIX		
00.	, 111011100/1E 0 10 10 1							
3c. MAII	LING ADDRESS	<u>-</u> .		CITY	STATE	POSTAL CODE	COUNTRY	
	025 Highway 2	25		Calera	AL	35040	LISA	
11020 Ingilway 20				/ _		100/		

4. This FINANCING STATEMENT covers the following collateral:

All now owned or hereafter acquired equipment which are fixtures on the property known as 9200 Hwy 119, Suite 600, Alabaster, Alabama 35007 and more particularly described in Item 14.

All proceeds of the equipment described above.

All books and records and the equipment described above.

The amount of the loan secured by these fixtures is \$234,000.00.

5.	ALTERNATIVE DESIGNATION [if applicable]: LESSE	E/LESSOR CONSIGNE	E/CONSIGNOR B/	AILEE/BAILOR SELLER/B	UYER AG. LIEN	NON-	UCC FILING
6.	This FINANCING STATEMENT is to be filed [for record ESTATE RECORDS Attach Addendum) (or recorded) in the REAL [if applicable]	• • · · · · · · · · · · · · · · · · · ·	SEARCH REPORT(S) on Debto [optional]	r(s) All Debtors	Debtor 1	Debtor 2
8.	OPTIONAL FILER REFERENCE DATA						
	D-7124						

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT 9a. ORGANIZATION'S NAME Alabaster Eye Care, Inc. 9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX 10. MISCELLANEOUS:

20121102000421700 2/2 \$380.00 Shelby Cnty Judge of Probate, AL 11/02/2012 12:48:04 PM FILED/CERT

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11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only o				
11a. ORGANIZATION'S NAME	tie hame (11a of 11b) - do not abbreviate of combine	Hanres		
11b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
				<u>, ,, _ ,, </u>
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1d. TAX ID #: SSN OR EIN ADD'L INFO RE 11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGANIZATION	11a OR0	GANIZATIONAL ID #, if a	inv
ORGANIZATION DEBTOR	1			
	P'S NAME - insert only <u>one</u> name (12a or 12b)			
12a. ORGANIZATION'S NAME			•	
)R	···· 1	T. T		
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
C. WAICHIO ADDINESS				
3. This FINANCING STATEMENT covers timber to be cut or as-extract	ed 16. Additional collateral description:	<u></u>	<u> </u>	
	70. Additional conditional accompliant.			
collateral, or is filed as a fixture filing. 4. Description of real estate:				
4. Description of real estate:				
ot 7, according to the Map of the White Stone Cer	nter			
Subdivision, as said may appears of record in the				
Office of the Judge of Probate of Shelby County,				
Alabama in Map Book 33, at pages 138-A and 138-	-B.			
5. Name and address of a RECORD OWNER of above-described real estate				
(if Debtor does not have a record interest):				
SCHILLECI WHITE STONE, LLC, an Alabama				
limited liability company	17. Check only if applicable and check only or	ne box		
	Debtor is a Trust or Trustee acting v		roperty held in trust or	Decedent's Est
	18. Check only if applicable and check only or		Popular in trade of	Decedent's Lat
	Debtor is a TRANSMITTING UTILITY			
	Filed in connection with a Manufactured-H	ome Transaction	n — effective 30 years	
	Filed in connection with a Public-Finance			