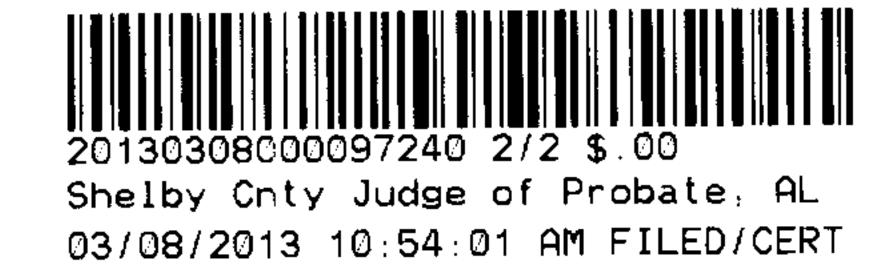


OW INSTRUCTIONS (front and back) CAREFULLY AME & PHONE OF CONTACT AT FILER [optional]			
ene Armstrong 226.1402			EI1
END ACKNOWLEDGMENT TO: (Name and Address)			
		20130308000097240 1/2 \$.00 20130308000097240 2/2 Probate: A	
Alabama Power Company		2013030800009/240 1/2 windste; A Shelby Chty Judge of Probate; A	L RT
600 18th St N		Shelby Chty Judge 01 17 FILED/CE 03/08/2013 10:54:01 AM FILED/CE	.,,,,,
Birmingham, AL 35203			
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	THE	ABOVE SPACE IS FOR FILING OFFICE US	
INITIAL FINANCING STATEMENT FILE# 20111220000385060		1b. This FINANCING STATEMENT AMENDMENT to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.	
TERMINATION: Effectiveness of the Financing Statement identi	fied above is terminated with respect to security inte	erest(s) of the Secured Party authorizing this Termin	ation Statement.
CONTINUATION: Effectiveness of the Financing Statement id continued for the additional period provided by applicable law.	entified above with respect to security interest(s) of	of the Secured Party authorizing this Continuation	Statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7	or 7b and address of assignee in item 7c; and also	o give name of assignor in item 9.	
MENDMENT (PARTY INFORMATION): This Amendment afford		Check only one of these two boxes.	
Uso check one of the following three boxes and provide appropriate inf	ormation in items 6 and/or 7.	ive record name	7a or 7b, and also
CHANGE name and/or address: Give current record name in item (name (if name change) in item 7a or 7b and/or new address (if add	Sa or 6b; also give new DELETE name: Givess change) in item 7c. to be deleted in item		s 7d-7g (if applica
CURRENT RECORD INFORMATION:	<u></u>		
6a. ORGANIZATION'S NAME			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Sowell	Charles	L.	······································
CHANGED (NEW) OR ADDED INFORMATION:		· · · · · · · · · · · · · · · · · · ·	
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Sowell	Allison	\mathbf{B}	
MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTR
834 Highway 333	Columbiana	AL 35051	US
TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZA	TION 7g. ORGANIZATIONAL ID #, if a	ny 🔲
AMENDMENT (COLLATERAL CHANGE): check only one box			·····
Describe collateral deleted or added, or give entire res	tated collateral description, or describe collateral	assigned.	
NAME OF SECURED PARTY OF RECORD AUTHORIZIN	G THIS AMENDMENT (name of assignor, if this	is an Assignment). If this is an Amendment authorized this Amendment	zed by a Debtor w
adds collateral or adds the authorizing Debtor, or if this is a Terminati	G THIS AMENDMENT (name of assignor, if this on authorized by a Debtor, check here and ente	is an Assignment). If this is an Amendment authorier name of DEBTOR authorizing this Amendment.	zed by a Debtor w
adds collateral or adds the authorizing Debtor, or if this is a Terminati 9a. ORGANIZATION'S NAME	G THIS AMENDMENT (name of assignor, if this on authorized by a Debtor, check here and ente	is an Assignment). If this is an Amendment authorier name of DEBTOR authorizing this Amendment.	zed by a Debtor w
adds collateral or adds the authorizing Debtor, or if this is a Terminati	G THIS AMENDMENT (name of assignor, if this on authorized by a Debtor, check here and enterprise	s is an Assignment). If this is an Amendment authori er name of DEBTOR authorizing this Amendment. MIDDLE NAME	zed by a Debtor w

TOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20111220000385060 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



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