A. NAME & PHONE OF CONTACT AT FILER [optional]  B. SEND ACKNOWLEDGMENT TO: (Name and Address)	She	130322000119100 1/1 \$29.00 elby Cnty Judge of Probate, A 22/2013 10:02:06 AM FILED/CE	
	THE ABO	OVE SPACE IS FOR FILING OFFICE	USE ONLY
1a. INITIAL FINANCING STATEMENT FILE # 20030602000337530 Shelby County, AL	Date Filed 06/02/2003	1b. This FINANCING STATEM to be filed [for record] (or REAL ESTATE RECORD	MENT AMENDMENT is recorded) in the
2. TERMINATION: Effectiveness of the Financing Statement identified a 3. CONTINUATION: Effectiveness of the Financing Statement identified		(s) of the Secured Party authorizing this Terr	nination Statement.
continued for the additional period provided by applicable law.			on Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b  5. AMENDMENT (PARTY INFORMATION): This Amendment affects			
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate informati		ck only <u>one</u> of these two boxes.	
CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.  CURRENT RECORD INFORMATION:	DELETE name: Give record name to be deleted in item 6a or 6b.	ADD name: Complete item 7a also complete items 7e-7g (if a	or7b, and also item 7c; pplicable).
6a. ORGANIZATION'S NAME			
Josie and Maria's - Meadow Brook Park, Birmingham, 6b. INDIVIDUAL'S LAST NAME	LLC FIRST NAME	MIDDLE NAME	SUFFIX
CHANGED (NEW) OR ADDED INFORMATION:		·	<u> </u>
7a. ORGANIZATION'S NAME			· · · · · · · · · · · · · · · · · · ·
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
d. <u>SEE INSTRUCTIONS</u> ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	N 7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if a	
. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box.			NON
Describe collateral deleted or added, or give entire restated co	ollateral description, or describe collateral as	ssigned.	
	2003 TOP12		
Commercial Mortgage Pass-Through Certificates, Series 2			
		ssignment). If this is an Amendment authori of DEBTOR authorizing this Amendment.	
9a. ORGANIZATION'S NAME	orized by a Debtor, check here and enter name	of DEBTOR authorizing this Amendment.	
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS adds collateral or adds the authorizing Debtor, or if this is a Termination authorizing Debtor.	orized by a Debtor, check here and enter name	of DEBTOR authorizing this Amendment.	