<u>.</u>	ONTACT AT FILER [optional]			
3. SEND ACKNOWLEDG	SMENT TO: (Name and Address)		20130322000119150 1/1 \$2 Shelby Cnty Judge of Pro 03/22/2013 10:02:11 AM F	bate, AL
		THE ABO	OVE SPACE IS FOR FILING OFFICE U	JSE ONLY
a. INITIAL FINANCING STATE		Date Filed 07/21/2003	1b. This FINANCING STATEM to be filed [for record] (or record).  REAL ESTATE RECORDS	ecorded) in the
. TERMINATION: Ef		ntified above is terminated with respect to security interest		
1 1	Effectiveness of the Financing Statement is tional period provided by applicable law.	identified above with respect to security interest(s) of the	Secured Party authorizing this Continuation	n Statement is
	· · · · · · · · · · · · · · · · · · ·	7a or 7b and address of assignee in item 7c; and also give	name of assignor in item 9.	
	Y INFORMATION): This Amendment af		ck only <u>one</u> of these two boxes.	
	wing three boxes <u>and</u> provide appropriate in address: Please refer to the detailed instruction		☐ ADD name: Complete item 7a	or7b, and also item 7
	he name/address of a party.	to be deleted in item 6a or 6b.	also complete items 7e-7g (if ag	oplicable).
6a. ORGANIZATION'S N				
VMJ - Meadow E	Brook Park, Birmingham, LLC			
66. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE NAME	SUFFIX
. CHANGED (NEW) OR A				
_	NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7b. INDIVIDUAL'S LAST				
76. INDIVIDUAL'S LAST				
76. INDIVIDUAL'S LAST		CITY	STATE POSTAL CODE	COUNTRY
76. INDIVIDUAL'S LAST	ADD'L INFO RE   7e, TYPE OF ORGAN			COUNTRY
76. INDIVIDUAL'S LAST				any
Th. INDIVIDUAL'S LAST  MAILING ADDRESS  SEEINSTRUCTIONS	ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION	NIZATION 7f. JURISDICTION OF ORGANIZATION		
MAILING ADDRESS  SEEINSTRUCTIONS  AMENDMENT (COLLA	ADD'L INFO RE   7e. TYPE OF ORGAN ORGANIZATION DEBTOR   ATERAL CHANGE): check only one box	NIZATION 7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID#, if a	any
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The INDIVIDUAL'S LAST  MAILING ADDRESS  SEE INSTRUCTIONS  AMENDMENT (COLLA  Describe collateral de	ADD'L INFO RE   7e. TYPE OF ORGAN ORGANIZATION DEBTOR   ATERAL CHANGE): check only one box	NIZATION  7f. JURISDICTION OF ORGANIZATION  x.  stated collateral description, or describe collateral a	7g. ORGANIZATIONAL ID#, if a	any
AMENDMENT (COLLA Describe collateral de	ADD'L INFO RE   7e. TYPE OF ORGAN ORGANIZATION DEBTOR  ATERAL CHANGE): check only one box eleted or added, or give entire rest	NIZATION  7f. JURISDICTION OF ORGANIZATION  A.  Stated collateral description, or describe collateral a	7g. ORGANIZATIONAL ID#, if a	any N
MAILING ADDRESS  E. SEE INSTRUCTIONS  AMENDMENT (COLLADescribe collateral describe d	ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION DEBTOR  ATERAL CHANGE): check only one box eleted or added, or give entire rest	NIZATION  7f. JURISDICTION OF ORGANIZATION  x.  stated collateral description, or describe collateral a	7g. ORGANIZATIONAL ID#, if a	ized by a Debtor wh
c. MAILING ADDRESS  d. SEE INSTRUCTIONS  AMENDMENT (COLLADescribe collateral describe describ	ADD'L INFO RE   7e. TYPE OF ORGAN ORGANIZATION DEBTOR  ATERAL CHANGE): check only one box eleted or added, or give entire restricted restricted present the present of the	ANIZATION  7f. JURISDICTION OF ORGANIZATION  A. Stated collateral description, or describe collateral and an accordance and ac	7g. ORGANIZATIONAL ID#, if a ssigned.  Assignment). If this is an Amendment authorize of DEBTOR authorizing this Amendment.	ized by a Debtor whi
Th. INDIVIDUAL'S LAST  C. MAILING ADDRESS  Describe collateral de  NAME OF SECURED adds collateral or adds the  9a. ORGANIZATION'S N	ADD'L INFO RE   7e. TYPE OF ORGAN ORGANIZATION   DEBTOR    ATERAL CHANGE): check only one box eleted or added, or give entire rest rest    PARTY OF RECORD AUTHORIZING authorizing Debtor, or if this is a Termination of the second Authorizing Debtor, and the second Authorizing Debtor, or if this is a Termination of the second Authorizing Debtor, as Trustee for ional Association, as Trustee for	NIZATION  7f. JURISDICTION OF ORGANIZATION  7c.  Attated collateral description, or describe collateral attated collateral attated att	7g. ORGANIZATIONAL ID#, if a ssigned.  Assignment). If this is an Amendment authorize of DEBTOR authorizing this Amendment.	ized by a Debtor whi