\$ 35.90 \$ 35.90	Shelt	by Cnty Judge of	Probate, AL
VD N  THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY
1b) - do not abbreviate or combine names	<u></u>		
FIRST NAME  LEIF	MIDDLE	NAME	SUFFIX
PELHAM	STATE	35124-6245	COUNTRY
1f. JURISDICTION OF ORGANIZATION	1g. ORG	NIZATIONAL ID #, if any	
e debtor name (2a or 2b) do not abbreviate or comb	ine names	<del></del>	NON
	· ··· · · · · · · · · · · · · · · · ·		
TEIRST NAME	MIDDLE	VAME	SUFFIX
LIKOT NAME	, , , , , , , , , , , , , , , , , , ,		
CITY	STATE	POSTAL CODE	COUNTRY
2f. JURISDICTION OF ORGANIZATION	2 <b>g</b> . ORG/ 	ANIZATIONAL ID#, if any	
C(D) in cost and your and north (name (2a at 2b)	<u> </u>	<u> </u>	NON
5/P) Insertomy one secured party name (5a of 5b)		<u></u>	
	<u> </u>	<u> </u>	
FIRST NAME	MIDDLE NAME		SUFFIX
CITY	STATE	POSTAL CODE	COUNTRY
	FIRST NAME LEIF CITY PELHAM  1f. JURISDICTION OF ORGANIZATION  FIRST NAME CITY 2f. JURISDICTION OF ORGANIZATION  S/P) insertonly one secured party name (3a or 3b)	THE ABOVE SPACE IS FOR MIDDLE IS STATE  LEIF  CITY  PELHAM  11. JURISDICTION OF ORGANIZATION  PIRST NAME  LOTY  AL  19. ORGA  AL  CITY  STATE  AL  21. JURISDICTION OF ORGANIZATION  22. ORGA  SIPP) insert only one secured party name (3a or 3b)	THE ABOVE SPACE IS FOR FILING OFFICE USE  Ib) - do not abbreviate or combine names    FIRST NAME

CONSIGNEE/CONSIGNOR

6. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) ESTATE RECORDS. Attach Addendum [if applicable] [ADDITIONAL FEE] [optional]

5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR

8. OPTIONAL FILER REFERENCE DATA

BAILEE/BAILOR

SELLER/BUYER

AG. LIEN

NON-UCC FILING

All Debtors \_\_\_ Debtor 1 \_\_\_ Debtor 2

······································	ack) CAREFULLY	TEMENT			
9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT  9a. ORGANIZATION'S NAME					
R					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME		20130513000 Shelby Cnty	197590 2/2 \$.00 Judge of Proba	te, AL
CARLSON	LEIF	M	05/13/2013	12:25:11 PM FIL	ED/CERT
ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only one	THE A		IS FOR FILING OFFI	CE USE ONLY
11a. ORGANIZATION'S NAME				· · · · · · · · · · · · · · · · · ·	-
11b. 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 ORGANIZA DEBTOR		11f. JURISDICTION OF ORGANIZATION	11g. OR	GANIZATIONAL ID #, if a	any N
2. ADDITIONAL SECURED PA 12a. ORGANIZATION'S NAME TOTAL COMFOR		S NAME - insert only one name (12a or 12b	)		
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS	<u></u>	CITY	STATE	POSTAL CODE	COUNTRY
230 OXMOOR CIR, S	TE 1101	HOMEWOOD	AL	35209	US
collateral, or is filed as a fixture filit. Description of real estate:  249 MACALLAN DRIVE PELHAM, AL 35124-6245  LEGAL DESCRIPTION PRIMARY LOT 1320	ing.				
SECTION 27 TOWNSHIP MAP BOOK 37 MAP PAC PARCEL #14 8 27 3 002 01 Stelly County, Halama	4.000				

Filed in connection with a Manufactured-Home Transaction

Filed in connection with a Public-Finance Transaction