CINDY THOMAS	S 205-326-8299 SMENT TO: (Name and Address)		Shelby Cnty J	30513000197610 1/2 \$.00 lby Cnty Judge of Probate, AL 13/2013 12:25:13 PM FILED/CERT			
605	ABAMA GAS CORPORATION RICHARD ARRINGTON JR BL RMINGHAM, AL 35203		VE SPACE IS FO	R FILING OFFICE USE	ONLY		
	JLLLEGAL NAME insert only one debtor name (1a or 1	lb)-do not abbreviate or combine names					
1a. ORGANIZATION'S N	AME						
1b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME			
HUGHES	. <u> </u>	ASHLEY	OTATE	IDOOTAL CODE	COUNTDY		
MAILING ADDRESS	MANIOD DD	PELHAM	STATE	35124-1555	COUNTRY		
707 CAHABA SEEINSTRUCTIONS	ADD'L INFO RE 1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION		ANIZATIONAL ID#, if any			
<u> </u>	ORGANIZATION DEBTOR	• •			N<		
P 2b. INDIVIDUAL'S LAST		FIRST NAME CITY	MIDDLE	NAME POSTAL CODE	SUFFIX		
. MAILING ADDRESS			SIAIE	POSTAL CODE	COUNTRY		
SEEINSTRUCTIONS	ADD'L INFO RE 2e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	2f. JURISDICTION OF ORGANIZATION	2g. ORG	ANIZATIONAL ID #, if any	N(
SECURED PARTY'S	NAME (or NAME of TOTAL ASSIGNEE of ASSIGNORS	S/P) insert only <u>one</u> secured party name (3a or 3b	o)	<u> </u>	··		
	GAS CORPORATION						
3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	MIDDLE NAME			
		CITY	STATE	POSTAL CODE	COUNTRY		
6. MAILING ADDRESS 605 RICHARD ARRINGTON JR BLVD N		BIRMINGHAM	AL	35203	US		
RHEEM GAS FU	ENT covers the following collateral: RNACE 07EAMER SERIAL #FU5D302F3	391200582					

8. OPTIONAL FILER REFERENCE DATA

/ / / / / / / / / / / / / / / / / / /	or 1b) ON RELATED FINANCING STA	TEMENT				
9a. ORGANIZATION'S NAME						
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
HUGHES	ASHLEY					
). MISCELLANEOUS:			Shel	სნ13000 by Cnty	197610 2/2 \$.00 Judge of Proba) τ
					12:25:13 PM FIL	
ADDITIONAL DERTOR'S EYAC	T FULL LEGAL NAME - insert only <u>one</u> r	name (11a or 11b) - do not abbrevi				
11a. ORGANIZATION'S NAME	TOLL LEGAL NAME - MISER ONLY ONE	TOTAL TO THE STATE OF THE STATE				
5		······································		TAUDD! =	NIA NACT	CHECK
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
A MANUAL AND A DECIDE	. <u> </u>	CITY		STATE	POSTAL CODE	COUNTRY
c. MAILING ADDRESS						
d. SEE INSTRUCTIONS ADD'L IN	FO RE 11e. TYPE OF ORGANIZATION	11f. JURISDICTION OF ORGAI	NIZATION	11g. ORG	SANIZATIONAL ID #, if a	any
ORGANIZ DEBTOR	, , , , , , , , , , , , , , , , , , ,	· 				
	ARTY'S or ASSIGNOR S/P'S	S NAME - insert only <u>one</u> name	e (12a or 12b)			
12a. ORGANIZATION'S NAME						
ALATEC 12b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME SUFFIX		
				INKODEE INAIVIE		SOFFIX
OC MAILING ADDRESS	<u> </u>	CITY	 .	STATE	POSTAL CODE	COUNTRY
2c. MAILING ADDRESS 1012 DECATUR HWY		FULTONDALE		AL	35068	US
3. This FINANCING STATEMENT cover collateral, or is filed as a fixture fixture. 4. Description of real estate: 707 CAHABA MANOR DELHAM, AL 35124-155	filing. R	16. Additional collateral descrip	otion:			
LEGAL DESCRIPTION PRIMARY LOT 48 CAHABA MANOR TOW MAP BOOK 6 MAP PAC	GE 105 D PAGE 0503000135430			•		
PARCEL #13 1 12 2 003 0 SHELBY COUNTY, ALA						

Debtor is a TRANSMITTING UTILITY

Filed in connection with a Manufactured-Home Transaction

Filed in connection with a Public-Finance Transaction