					
UCC FINANCING STATEMENT AMENDIN	AENT .				
FOLLOW INSTRUCTIONS			20130717000	289630 1/1 \$.00 Judge of Probat	e, AL
A. NAME & PHONE OF CONTACT AT FILER (optional) Dam Elymp 679 930 4429			07/17/2013	10:16:51 AM FILE	ED/CERI
Pam Flynn 678-839-4428 B. E-MAIL CONTACT AT FILER (optional)	<u> </u>				
O OEND A OKNOVAL EDOMENT TO: (News and Address)					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
Community & Southern Bank PO Box 280					
Carrollton GA 30112					
1a. INITIAL FINANCING STATEMENT FILE NUMBER				FILING OFFICE USE	
20130319000115050		1b. This FINANCING Store (or recorded) in the Filer. attach Amendme		ECORDS UCC3Ad) <u>and</u> provide Debte	
2. TERMINATION: Effectiveness of the Financing Statement identification Statement	ed above is terminated	with respect to the security	interest(s) of Secu	red Party authorizing this	Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item	7a or 7b, <u>and</u> address o	of Assignee in item 7c <u>and</u> n	ame of Assignor in	n item 9	
For partial assignment, complete items 7 and 9 and also indicate af	fected collateral in item	8		· · · · · · · · · · · · · · · · · · ·	
4. CONTINUATION: Effectiveness of the Financing Statement iden continued for the additional period provided by applicable law	tified above with respec	t to the security interest(s) o	of Secured Party a	uthorizing this Continuati	on Statement is
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes.	neck <u>one</u> of these three b CHANGE name and/or Litem 6a or 6b; and item	address: Complete AD 7a or 7b <u>and</u> item 7c 7a	D name: Complete or 7b, and item 7c	item DELETE name:	Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Information			or re, grig trem re		
Adams Homes LLC, an Alabama limit	ed liability co	mnany 3000 Gi	ılf Breeze	Parkway Gul	f Rreeze I
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSO	······································		AL NAME(S)/INITIAL(S)	SUFFIX
7 CHANCED OD ADDED INCODMATION: Complete for Assessment of Dec					
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME	y Information Change - provide	only <u>one</u> name (/a or /b) (use exact	i, full name, do not omi	, modify, or appreviate any partic	of the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME	# ************************************			· 	
INDIVIDUAL'S FIRST PERSONAL NAME				· · · · · · · · · · · · · · · · · · ·	 , , , , , , , , , , , , , , , , , ,
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		······································			SUFFIX
7- 1444 1210 400000			······································		
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE cov	rered collateral	ASSIGN collateral
Indicate collateral.					
Lot 33 Old Ivy Subdivision PH II					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING T	SHE AMENDMENT: A	Provide only one name (Co. or			
	LIO VIAIEIADIAIEIAI.	novide only <u>one</u> haine (sa or	9b) (name of Assig	inor, if this is an Assignme	nt)
If this is an Amendment authorized by a DEBTOR, check here and p	rovide name of authorizing	ng Debtor	9b) (name of Assig	nor, if this is an Assignme	nt)
If this is an Amendment authorized by a DEBTOR, check here and p 9a. ORGANIZATION'S NAME Community & Southern Bank	rovide name of authorizing	ng Debtor	9b) (name of Assig	nor, if this is an Assignme	nt)
If this is an Amendment authorized by a DEBTOR, check here and p 9a. ORGANIZATION'S NAME	rovide name of authorizing	ng Debtor		L NAME(S)/INITIAL(S)	SUFFIX
If this is an Amendment authorized by a DEBTOR, check here and p 9a. ORGANIZATION'S NAME Community & Southern Bank OR	rovide name of authorizing	ng Debtor			