	C FINANCING STATEMENT AMENDMEN LOW INSTRUCTIONS (front and back) CAREFULLY		KIULIA			
	NAME & PHONE OF CONTACT AT FILER [optional]					
	lene Armstrong 205- 226-1402 SEND ACKNOWLEDGMENT TO: (Name and Address)					
. `	FTT					
	A 1-1 D O		•	20130	912000371080 1/2	\$.00
	Alabama Power Company 600 18th St N			-4 11	912000371080 1/2 3 y Cnty Judge of Pi /2013 03:09:00 PM	ropate; Tie
	Birmingham, AL 35203			09/12	/2013 03:05.00 11	• –
. 1	NITIAL FINANCING STATEMENT FILE #		I HE ABOVE		S FOR FILING OFFICE This FINANCING STATE	
	20080603000224290				to be filed [for record] (or REAL ESTATE RECORD	recorded) in the
þ	TERMINATION: Effectiveness of the Financing Statement identified above is	s terminated with	respect to security interest(s) of	of the Secure		
	CONTINUATION: Effectiveness of the Financing Statement identified above continued for the additional period provided by applicable law.	ve with respect t	o security interest(s) of the Se	cured Party	authorizing this Continuation	on Statement is
	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a	address of assigr	ee in item 7c; and also give na	me of assign	nor in item 9.	
/	MENDMENT (PARTY INFORMATION): This Amendment affects Det	btor <u>or</u> Sec	cured Party of record. Check of	nly <u>one</u> of t	nese two boxes.	
^	Iso check one of the following three boxes and provide appropriate information in it			_		
	CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	o give new) in item 7c.	DELETE name: Give record to be deleted in item 6a or 6		ADD name: Complete ite item 7c; also complete ite	
	CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	<u></u>				
	TOAL ORGANIZATION STVANE					
	6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIC	DLE NAME	SUFFIX
	Moore	Williams		G		
(CHANGED (NEW) OR ADDED INFORMATION:	•	······································			
	7a. ORGANIZATION'S NAME		· ····· <u>·</u> · ······ · · · · · · · · · ·			
		····•		·	······································	······································
	7b. INDIVIDUAL'S LAST NAME	FIRST NAME			DLE NAME	SUFFIX
,	Moore MAILING ADDRESS	Louiseza	·	M	TE IDOOTAL OODE	COLINED
	108 Southview Dr	Birming!	ham	Al	TE POSTAL CODE 35244	COUNTR
	TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION		TION OF ORGANIZATION		ORGANIZATIONAL ID #, if	<u></u>
	ORGANIZATION ' DEBTOR I				· · · · · · · · · · · · · · · · · · ·	
/	MENDMENT (COLLATERAL CHANGE): check only one box.				· · · · · · · · · · · · · · · · · · ·	
	escribe collateral deleted or added, or give entire restated collatera	al description, or	describe collateral assignment	ned.		
		•	المينية الميني المينية المينية			
	•					
_	IAME OF SECURED PARTY OF DECORD ALITHODIZING THIS AME					
	IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME	ENDMENT (nar	ne of assignor, if this is an Assick here and enter name of	gnment). If t	his is an Amendment author	ized by a Debtor wh
1	IAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AME dds collateral or adds the authorizing Debtor, or if this is a Termination authorized to 9a. ORGANIZATION'S NAME	ENDMENT (nar by a Debtor, chec	ne of assignor, if this is an Assignation and enter name of	gnment). If t	his is an Amendment author authorizing this Amendment.	ized by a Debtor wh
а	dds collateral or adds the authorizing Debtor, or if this is a Termination authorized t	ENDMENT (nar by a Debtor, chec	ne of assignor, if this is an Assignation and enter name of	gnment). If t	his is an Amendment author authorizing this Amendment.	ized by a Debtor wh
a	dds collateral or adds the authorizing Debtor, or if this is a Termination authorized to 9a. ORGANIZATION'S NAME	ENDMENT (nar by a Debtor, chec	ck here and enter name of	DEBTOR	his is an Amendment author authorizing this Amendment. DLE NAME	ized by a Debtor wh

LICC FINANCING STATEMENT AMENDMENT ADDENDIM

UU	C FINANCING STATE	AICIA I MIAICIA DIAIR	-IAI WOOFIADOM			
FOL	LOW INSTRUCTIONS (front and ba	ck) CAREFULLY				
11.	INITIAL FINANCING STATEMENT F	FILE # (same as item 1a on Ame	ndment form)			
	20080603000224290					
12.	NAME OF PARTY AUTHORIZING	THIS AMENDMENT (same as	item 9 on Amendment form)			
	12a. ORGANIZATION'S NAME					
αO	Alabama Power Company					
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
		I				

13. Use this space for additional information



09/12/2013 03:09:00 PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY