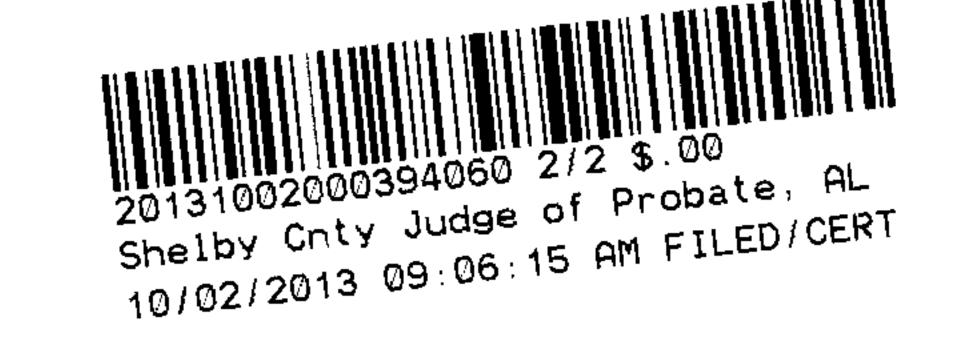
	STATEMENT AMENDME! (front and back) CAREFULLY	NT	MAL		
	ONTACT AT FILER [optional]				
	MENT TO: (Name and Address)				
Alabama Pow 600 18th St N Birmingham,			013100200039406 helby Cnty Jude 0/02/2013 09:06	0 1/2 \$.00 e of Probate, AL : 15 AM FILED/CERT	
a. INITIAL FINANCING STATI			1b.	FOR FILING OFFICE U	ENT AMENDMEN
Le TEDIANIA TIONI	20100618000194020			to be filed [for record] (or re REAL ESTATE RECORDS.	
	ectiveness of the Financing Statement identified above				
continued for the addition	ffectiveness of the Financing Statement identified about the provided by applicable law.	ove with respect to security interest(s)	of the Secured Party a	uthorizing this Continuation	Statement is
ASSIGNMENT (full o	r partial): Give name of assignee in item 7a or 7b and	d address of assignee in item 7c; and al	so give name of assigno	r in item 9.	
name (if name change) in CURRENT RECORD INF		lso give new DELETE name: (le) in item 7c. to be deleted in ite		ADD name: Complete item item 7c; also complete item	ns 7d-7g (if applic
66. INDIVIDUAL'S LAST 1 Wilkins	NAME	FIRST NAME Frankie	MIDD	LE NAME	SUFFIX
7a. ORGANIZATION'S NA					
AKA Demerse	Hammonds				
	.i Λ λ λ ⊏	FIRST NAME	MIDD	LE NAME	SUFFIX
76. INDIVIDUAL'S LAST I	ALCORE .	1_			
Wilkins	V∕VIVIC	Demerse	J	E IDOCEAL CODE	00111175
Wilkins MAILING ADDRESS	· · · · · · · · · · · · · · · · · · ·	Demerse CITY Wilsonville	J STAT AL	E POSTAL CODE 35186	COUNTR
Wilkins MAILING ADDRESS 261 Howard Hill D	· · · · · · · · · · · · · · · · · · ·	CITY	AL		US
Wilkins MAILING ADDRESS 261 Howard Hill D	r ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	Wilsonville	AL	35186	US
Wilkins MAILING ADDRESS 261 Howard Hill D TAX ID #: SSN OR EIN AMENDMENT (COLLAT	r ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	Wilsonville 7f. JURISDICTION OF ORGANIZA	TION 7g. OI	35186	US
Wilkins MAILING ADDRESS 261 Howard Hill D TAX ID #: SSN OR EIN AMENDMENT (COLLAT Describe collateral dele	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	Wilsonville 7f. JURISDICTION OF ORGANIZA eral description, or describe collateral MENDMENT (name of assignor, if this	TION 7g. Of assigned.	35186 RGANIZATIONAL ID #, if ar	US
Wilkins MAILING ADDRESS 261 Howard Hill D TAX ID #: SSN OR EIN AMENDMENT (COLLAT Describe collateral dele	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR TERAL CHANGE): check only one box. ted or added, or give entire restated collate PARTY OF RECORD AUTHORIZING THIS AMulthorizing Debtor, or if this is a Termination authorized.	Wilsonville 7f. JURISDICTION OF ORGANIZA eral description, or describe collateral MENDMENT (name of assignor, if this	TION 7g. Of assigned.	35186 RGANIZATIONAL ID #, if ar	Ty

10. OPTIONAL FILER REFERENCE DATA

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

=OL	LOW INSTRUCTIONS (front and back	k) CAREFULLY			
11. 1	INITIAL FINANCING STATEMENT FI 20100618000194020	LE # (same as item 1a on Ame	endment form)		
12.	NAME OF PARTY AUTHORIZING TI 12a. ORGANIZATION'S NAME	HIS AMENDMENT (same as	item 9 on Amendment form)		
OR	Alabama Power Company				
UK	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SUFFIX		

13. Use this space for additional information



THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY