## UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] CINDY THOMAS 205-326-8299 B. SEND ACKNOWLEDGMENT TO: (Name and Address) **ALABAMA GAS CORPORATION** 605 RICHARD ARRINGTON JR BLVD N

BIRMINGHAM, AL 35203

10/29/2013 12:12:34 PM FILED/CERT

· · · · · · · · · · · · · · · · · · ·	THE ABOVE S	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY			
. DEBTOR'S EXACT FULL LEGAL NAME-insert only one debtor name (1a or 1b)	) - do not abbreviate or combine names		· -		
1a. ORGANIZATION'S NAME					
ND		IAAIDDI E	NIABAT	SUFFIX	
1b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME  D		SUPPIA	
VAN RYAN	ALEC			COUNTRY	
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
081 STONEYKIRK RD	PELHAM	AL	35124	US	
. SEE INSTRUCTIONS ADD'L INFO RE 1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORGANIZATIONAL ID #, if any			
Not Applicable DEBTOR	i	İ		NC	
ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one of	debtor name (2a or 2b) - do not abbreviate or comb	ine names			
2a. ORGANIZATION'S NAME	ACDID! HOLLIO (EG C) ES) GO HOLGON GINGIO GI GOLLIO				
2b. INDIVIDUAL'S LAST NAME	FIRST NAME	FIRST NAME MIDDLE NAME		SUFFIX	
20. INDIVIDUAL GLAGITANIAL					
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
·	24 HIDISDICTION OF ODG ANIZATION	SDICTION OF ORGANIZATION 2g. ORGANIZATIONAL ID #, if any			
SEEINSTRUCTIONS ADD'L INFO RE 2e. TYPE OF ORGANIZATION	21. JUNISSICTION OF ORGANIZATION	1-3.			
ORGANIZATION	ZI. JURISSICTION OF ORGANIZATION	-3		No	
Not Applicable ORGANIZATION DEBTOR				NC	
ORGANIZATION '				N(	
ORGANIZATION DEBTOR  SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/  3a. ORGANIZATION'S NAME				N	
ORGANIZATION DEBTOR  SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/  3a. ORGANIZATION'S NAME  ALABAMA GAS CORPORATION		MIDDLE	NAME	SUFFIX	
ORGANIZATION DEBTOR  SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/  3a. ORGANIZATION'S NAME  ALABAMA GAS CORPORATION	P) - insert only <u>one</u> secured party name (3a or 3b)		NAME		
Not Applicable  SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/  3a. ORGANIZATION'S NAME  ALABAMA GAS CORPORATION  3b. INDIVIDUAL'S LAST NAME	P) - insert only <u>one</u> secured party name (3a or 3b)		NAME POSTAL CODE		
ORGANIZATION DEBTOR  SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/  3a. ORGANIZATION'S NAME  ALABAMA GAS CORPORATION	P) - insert only <u>one</u> secured party name (3a or 3b)  FIRST NAME	MIDDLE		SUFFIX	

LENNUX FURNACE M# ML180UH045P24A S# 5913H11002

LENNOX A/C M# 13ACX-024-230-20 S# 1913F27559

\$4251.00

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5. ALTERNATIVE DESIGNATION [if applicable]:		CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG, LIEN NON-UCC FILING
6. This FINANCING STATEMENT is to be filed [for ESTATE RECORDS. Attach Addendum	or record] (or recorded) in [	the REAL 7. Check to REC [if applicable] [ADDITIONAL	QUEST SEARCH REPORT(S FEE) [opt	S) on Debtor(s) tional All	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA					

	EMENT ADDENDUM				
LLOW INSTRUCTIONS (front and I	1b) ON RELATED FINANCING STA	TEMENT			
9a. ORGANIZATION'S NAME					
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
VAN RYAN	ALEC	$\mathbf{D}$			
MISCELLANEOUS:					
				29000427610 2/2	-
				Cnty Judge of Pi 2013 12:12:34 PM	
			1012.01	2013 12.12;34 PIT	FILED/CERT
			THE ABOVE SPAC	E IS FOR FILING OFF	ICE USE ONLY
ADDITIONAL DEBTOR'S EXACT	T FULL LEGAL NAME - insert only <u>one</u> r	ame (11a or 11b) - do not abbrev	iate or combine names		
11a. ORGANIZATION'S NAME					
AAL INION ADLIANCE NACT NAME		TEIDOT NAME	MIDD	LE NAME	SUFFIX
11b. INDIVIDUAL'S LAST NAME		FIRST NAME		CE MANUE	
MAILING ADDRESS	<u> </u>	CITY	STAT	E POSTAL CODE	COUNTRY
WINICING ADDINESS					
SEEINSTRUCTIONS ADD'L INFO	<b>i</b>	11f. JURISDICTION OF ORGA	NIZATION 11g. (	ORGANIZATIONAL ID#, if	any
lot Applicable DEBTOR	ATION (				NO
ADDITIONAL SECURED PA	RTY'S or ASSIGNOR S/P'S	NAME - insert only <u>one</u> name	(12a or 12b)	<u> </u>	
12a. ORGANIZATION'S NAME					
SERVICE EXPERTS/S	TEEL CITY	Teles com All A A E	MIDD	A C NIANAC	CUECIV
12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDL	LE NAME	SUFFIX
. MAILING ADDRESS	<u> </u>	CITY	STAT	E POSTAL CODE	COUNTRY
524 COMMERCE SQ W		IRONDALE	AL	35210	US
This FINANCING STATEMENT covers	timber to be cut or as-extracted	16. Additional collateral descr	iption:		
collateral, or is filed as a fixture fil					
, Description of real estate:					
081 STONEYKIRK RD					
ELHAM, AL 35124					
EGAL DESCRIPTION					
	AT BALLANTRAE PH 2				
1AP BOOK 32 MAP PAG					
ARCEL # 14 8 28 2 004 0	02.000				
HELBY COUNTY, ALAI	BAMA				
Name and address of a RECORD OW	NED of above described real estate				
(if Debtor does not have a record intere					
		17. Check <u>only</u> if applicable a	nd check only one box.		
		Debtor is a Trust or		to property held in trust o	r Decedent's Est
		18. Check only if applicable a		. •	<u>.                                    </u>
		Debtor is a TRANSMITTIN	G UTILITY		
		Filed in connection with a		ction — effective 30 years	

Filed in connection with a Public-Finance Transaction — effective 30 years