	CC FINANCING STATEMENT AMEN	IDMENT	•				
L	LOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER (optional)	*	<del></del>				
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S	SEND ACKNOWLEDGMENT TO: (Name and Address)						
	ALABAMA POWER COMPANY						
	POST OFFICE BOX 129						
	ANNISTON, ALABAMA 36201						
				2014011700001 Shelby Cnty 3	LIMAA (1)		
				01/17/2014 09	31:24	AM FILED/CERT	
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11	INITIAL FINANCING STATEMENT FILE #			THE ABOVE SP		OR FILING OFFICE US	
51	2008112100044	5850 11	-21-2008		L to	be filed (for record) (or res	
X	X TERMINATION: Effectiveness of the Financing Statement ide	enufied above is to	erminated with	respect to security interest(s) of the			iation Statement.
	CONTINUATION: Effectiveness of the Financing Statemen	t identified above	with respect t	o security interest(s) of the Secure	d Party aut	norizing this Continuation	Statement is
_	continued for the additional period provided by applicable law.						
	ASSIGNMENT (full or partial): Give name of assignee in iten					<del></del>	
	AMENDMENT (PARTY INFORMATION): This Amendment also check one of the following three boxes and provide appropriate	learett.		sured Party of record. Check only g	ne of these	two boxes.	
•	TI CHANGE name and/or address: Give current record name in ite	m 6a or 6b; also g	give new [	DELETE name. Give record name		DD name: Complete item	
	name (if name change) in item 7s or 7b and/or new address (if a CURRENT RECORD INFORMATION	iddress change) ir	ritem 7c.	to be deleted in item 6a or 6b.	<u> </u>	em 7c: also complete item	ts /d-/d (II applic
	6a. ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·	······································		<u>, </u>		
	66. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE	NAME	SUFFIX
	Cloutier	<del></del>	Ricky		J	·	
	CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME	<del>- , , , , , , , , , , , - , ,</del>					
	76. INDIVIDUAL'S LAST NAME	<u> </u>	FIRST NAME	· · · · · · · · · · · · · · · · · · ·	MIDDL	E NAME	SUFFIX
	Howard		Aaron	·	J.H.		
_	MAILING ADDRESS		CITY	_:11 _	STATE		COUNTE
	232 Highway 62		Harpers		AL	35078	USA
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2	TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR   AMENDMENT (COLLATERAL CHANGE): check only one b	OX.					
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2	TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR    AMENDMENT (COLLATERAL CHANGE): check only one book collateral   deleted or   added, or give entire   recommendation   deleted or   added   or give entire   recommendation   deleted   recommendation   re	OX.					
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1b. INDIVIDUAL'S LAST	NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
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AND BUC ADDRESS				1 4 1	0.5050	110 4
			i Harpersville	Al	35078	USA
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