| 605 | S (front and back ONTACT AT FILE 205-326-82) MENT TO: (Name of the content of the | CAREFULLY R [optional] 99 ne and Address) S CORPORATION ARRINGTON JR BLY | | 01401280000: helby Cnty | 26950 1/2 \$36.85 Judge of Probate 0:30:26 AM FILED | | |
|--|--|--|---|---------------------------------------|---|---------|--|
| | | | THE ABOV | /E SPACE IS FO | R FILING OFFICE US | SE ONLY | |
| L DEBTOR'S EXACT FL | JLL LEGAL NAME | insert only one debtor name (1a or 1b) | -do not abbreviate or combine names | L OF AUE 13 FU | IN ILING OF FICE US | | |
| 1a. ORGANIZATION'S NA | | | | · · · · · · · · · · · · · · · · · · · | | | |
| OR 16, INDIVIDUAL'S LASTN | I A NACE | | FIRST NAME | IMIDDI E | TAURED E ALABAE | | |
| ID. INDIVIDUAL SEASTIN | | | SAUNDRA | | MIDDLE NAME | | |
| MCROBERTS c. MAILING ADDRESS | | · - · - · - · · · · · · · · · · · · · · | CITY | STATE | POSTAL CODE | COUNTRY | |
| 112 SUMMER HI | LL DR | | ALABASTER | AL | 35007 | US | |
| SEE INSTRUCTIONS | ADD'L INFO RE | 1e. TYPE OF ORGANIZATION | 1f. JURISDICTION OF ORGANIZATION | | ANIZATIONAL ID #, if any | | |
| Not Applicable | ORGANIZATION DEBTOR | <u> </u> | | 1 | | NO | |
| 2a. ORGANIZATION'S NA | AME | LEGAL INAIVIE - Insert only <u>one</u> d | ebtor name (2a or 2b) - do not abbreviate or co | MIDDLE | NAME | SUFFIX | |
| c. MAILING ADDRESS | | | CITY | STATE | POSTAL CODE | COUNTRY | |
| Not Applicable | ADD'L INFO RE ORGANIZATION DEBTOR | 2e. TYPE OF ORGANIZATION | 2f. JURISDICTION OF ORGANIZATION | 2g. ORG | ANIZATIONAL ID #, if any | NC | |
| | | TOTAL ASSIGNEE of ASSIGNOR S/F | P) - insert only <u>one</u> secured party name (3a or 3b) | | | | |
| 3a. ORGANIZATION'S NA | | A TION | | | | | |
| ALABAMA GAS CORPORATION 3b. INDIVIDUAL'S LAST NAME | | FIRST NAME | MIDDLE NAME | | SUFFIX | | |
| c. MAILING ADDRESS | | · · · · · · · · · · · · · · · · · · · | CITY | STATE | POSTAL CODE | COUNTRY | |
| 605 RICHARD AF | RRINGTON. | JR BLVD N | BIRMINGHAM | AL | 35203 | US | |
| 4. This FINANCING STATEME AMERICAN STATEME M# UAD1C100A9 S# S1233388T1G | ENT covers the follow | /ing collateral: | BIRMINGHAM | AL | 35203 | | |

| 5. ALTERNATIVE DESIGNATION [if applicable]: | LESSEE/LESSOR | CONSIGNEE | CONSIGNOR | BAILEE/BAILOR | SELLER/BUYER | AG, LIEN | NON-UCC FILING |
|--|---------------------------|--------------------------------|--------------------------------|--------------------------|----------------------------------|-------------|-------------------|
| This FINANCING STATEMENT is to be filed [ESTATE RECORDS Attach Addendum | for record] (or recorded) | in the REAL [if applicable] | 7. Check to REQ [ADDITIONAL | UEST SEARCH REPO FEET | RT(S) on Debtor(s) [optional] | All Debtors | Debtor 1 Debtor 2 |
| 3. OPTIONAL FILER REFERENCE DATA | | | | | | | |

| MIDDLE NAME, SUFFIX SAUNDRA SA | UCC FINANCING STATEMENT ADDENDU | M | | | | | |
|--|---|--|--|-------------------------|-------------------|--|--|
| OR 90. INDIVIDUAL'S LAST NAME FIRST NAME SAUNDRA She into the cot of She into th | | | | | | | |
| MIDDLE NAME, SUFFIX SAUNDRA SA | | | | | | | |
| MCROBERTS SAUNDRA Shelby Cnty Judge of Probate, HL 01/28/2014 10:30:26 AM FILED/CERT THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S LAST NAME FIRST NAME ADDILINFO RE 11b. TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION'S NAME ADDILINFO RE 11b. TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION'S NAME TOTAL COMFORT 12b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) TOTAL COMFORT 12c. MALLING ADDRESS CITY STATE MIDDLE NAME SUFFIX ORGANIZATION'S NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX NONE TOTAL COMFORT 12c. MALLING ADDRESS CITY STATE FOSTAL CODE COUNTRY ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) TOTAL COMFORT 12c. MALLING ADDRESS CITY STATE FOSTAL CODE COUNTRY HOMEWOOD AL 35209 US | OR | | | | | | |
| 10. MISCELLANEOUS: THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME Interviolutal'S LAST NAME FIRST NAME FIRST NAME Interviolutal'S LAST NAME | | | 201401280000269 | lge of Probate, | Al_ | | |
| THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only ging name (11a or 11b) - do not abbreviate or combine names 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11d. SEEINSTRUCTIONS ADDIL DNPO RE 11e. TYPE OF ORGANIZATION 11f. JURISDICTION OF ORGANIZATION 11g. ORGANIZATIONAL ID #, if any DNONE 12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only ging name (12a or 12b) 12a. ORGANIZATION SNAME TOTAL COMFORT Tab. INDIVIDUAL'S LAST NAME SUFFIX SUFFIX SUFFIX SUFFIX STATE POSTAL CODE COUNTRY 12c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 13d. INDIVIDUAL'S LAST NAME SUFFIX SUFFIX STATE POSTAL CODE COUNTRY 13d. This FINANCING STATEMENT covers Imber to be out or as-extracted security security state Postal code Country 13d. This FINANCING STATEMENT covers Imber to be out or as-extracted security security State Postal code Country 14d. Description of real estate: | MCROBERTS SAUNDRA | S | 01/28/2014 10:3 | 0:26 AM FILED/ | CERT | | |
| 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S LAST NAME 11c. MAILING ADDRESS 11d. SEEINSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION DEBTOR 11c. MAILING ADDRESS 11d. SEEINSTRUCTIONS ADD'L INFO RE 11e. TYPE OF ORGANIZATION DEBTOR 11f. JURISDICTION OF ORGANIZATION DEBTOR 11g. ORGANIZATIONAL ID #, if any NONE 12d. ADDITIONAL SECURED PARTY'S ORGANIZATION DEBTOR 12d. ORGANIZATION'S NAME FIRST NAME MIDDLE NAME SUFFIX 12d. ORGANIZATION'S NAME FIRST NAME MIDDLE NAME SUFFIX 12d. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12d. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12d. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 13d. This FINANCING STATEMENT covers timber to be cut or as-extracted as-extracted collateral, or is filed as a fixture filing. 14d. Description of real estate: | 10.MISCELLANEOUS: | | | | | | |
| 113. ORGANIZATION'S NAME OR 114. INDIVIDUAL'S LAST NAME ITHE INDIVIDUAL | | | | | | | |
| 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S LAST NAME ITC. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11d. SEEINSTRUCTIONS NOT Applicable ORGANIZATION DEBTOR 12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATION'S NAME TOTAL COMFORT 12b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX NONE 12c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY HOMEWOOD AL 35209 US 16. Additional collateral description. | | | | | | | |
| OR 11b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX STATE POSTAL CODE COUNTRY 11d. SEEINSTRUCTIONS NOT Applicable ORGANIZATION DEBTOR 12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) 12a. ORGANIZATION'S NAME TOTAL COMFORT 12b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX SUFFIX SUFFIX STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY HOMEWOOD AL 35209 US 13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a forture filing. 14. Description of real estate: | | <u>one</u> name (11a or 11b) - do not abbrevia | te or combine names | <u></u> , | | | |
| 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11d. SEEINSTRUCTIONS NOT Applicable ORGANIZATION DEBTOR 12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) TOTAL COMFORT 12b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME FIRST NAME MIDDLE NAME SUFFIX STATE POSTAL CODE COUNTRY NONE 12c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY TOTAL COMFORT 12c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY HOMEWOOD AL 35209 US 14. Description of real estate: | | | | | | | |
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| 11d. SEEINSTRUCTIONS NOT Applicable Not Applicable ORGANIZATION DEBTOR 12. ADDITIONAL SECURED PARTY'S OF ASSIGNOR S/P'S NAME - insert only one name (12a or 12b) TOTAL COMFORT 12b. INDIVIDUAL'S LAST NAME FIRST NAME FIRST NAME FIRST NAME OXMOOR CIR, STE 1101 13. This FINANCING STATEMENT covers I timber to be cut or or as-extracted collateral, or is filed as a fixture filing. 14. Description of real estate: | | | | | | | |
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| 12a. ORGANIZATION'S NAME TOTAL COMFORT 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX 12c. MAILING ADDRESS CITY TOTAL COMFORT 12b. INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX STATE POSTAL CODE COUNTRY HOMEWOOD AL 35209 US 13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing. 14. Description of real estate: | | /DIC NAME : | | | NONE | | |
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| 12b. INDIVIDUAL'S LAST NAME SUFFIX 12c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 230 OXMOOR CIR, STE 1101 HOMEWOOD AL 35209 US 13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filled as a fixture filling. 14. Description of real estate: | TOTAL COMFORT | | | | | | |
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| 13. This FINANCING STATEMENT covers timber to be cut or as-extracted collateral, or is filed as a fixture filing. 14. Description of real estate: | 12c. MAILING ADDRESS | | | | | | |
| collateral, or is filed as a fixture filing. 14. Description of real estate: | | · · · · · · · · · · · · · · · · · · · | —————————————————————————————————————— | 35209 | US | | |
| 112 SUMMER HILL DR | | ted 10. Additional collateral descript | ion: | | | | |
| ALABASTER, AL 35007 | 112 SUMMER HILL DR ALABASTER, AL 35007 | | | | | | |
| LEGAL DESCRIPTION LOT 64-B | | | | | | | |
| SUMMER BROOK SECTOR 5 PHASE 6 | | | | | | | |
| MAP BOOK 23 MAP PAGE 48 | | | | | | | |
| PARCEL # 23 2 10 1 001 001.107 | | | | | | | |
| SHELBY COUNTY, ALABAMA | SHELDY COUNTY, ALADAMA | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | 15. Name and address of a RECORD OWNER of above-described real estate | | | | | | |
| (if Debtor does not have a record interest): | (if Debtor does not have a record interest): | | | | | | |
| | | | | | | | |
| 17. Check only if applicable and check only one box. | | | _ _ | | | | |
| Debtor is a Trust or Trustee acting with respect to property held in trust or Decedent's Estate | | | | operty held in trust or | Decedent's Estate | | |
| 18. Check <u>only</u> if applicable and check <u>only</u> one box. | | | | | | | |
| Debtor is a TRANSMITTING UTILITY Filed in connection with a Magnifestured Home Transaction - offective 20 years | | \ | | ~ 86 4 ' | | | |
| Filed in connection with a Manufactured-Home Transaction — effective 30 years Filed in connection with a Public-Finance Transaction — effective 30 years | | | anniachten-Home Trabsaction | — errective 3D Vears | | | |