

	NTACT AT FILE	ER [optional]					
Selene Armstrong 20		- · · · · ·					
3. SEND ACKNOWLEDGM							
;						40220000047110	
Alabama Powe	r Company				20 ⁻	40220000047110	1/2 \$.00
600 18th St N	Company				2116	20/2014 10:56:3	of Drobata a
Birmingham, A	L 35203						HM FILED/CER
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	······································			THE ABOVE SPAC	EISFO	OR FILING OFFICE US	SE ONLY
a. INITIAL FINANCING STATE		090326000112650				s FINANCING STATEME be filed [for record] (or rec	
TERMINIATION: 5%					L RE	AL ESTATE RECORDS.	
			above is terminated with respect to se				
continued for the addition	ectiveness of the li lal period provided	Financing Statement identifi d by applicable law.	ed above with respect to security int	erest(s) of the Secured Pa	arty auth	orizing this Continuation	Statement is
ASSIGNMENT (full or	nartial): Give nam	se of assignee in item 7a or 7	b and address of assignee in item 7c			't ^	
. AMENDMENT (PARTY II							
Also check one of the following			<u></u>	f record. Check only <u>one</u> of	of these	two boxes.	
CHANGE name and/or ad	dress: Give currer	nt record name in item 6a or	6b; also give new DELETE n	ame: Give record name	A	DD name: Complete item	7a or 7b, and also
. CURRENT RECORD INFO		or new address (if address of	change) in item 7c to be delet	ted in item 6a or 6b.	ite	m 7c; also complete item:	s 7d-7g (if applicable).
6a. ORGANIZATION'S NAM					······		
6b. INDIVIDUAL'S LAST NAME			FIRST NAME	FIRST NAME		MIDDLE NAME SUFFIX	
Gallier			Michael		\mathbf{w}		
. CHANGED (NEW) OR ADD	ED INFORMATI	ON:				•	
7a. ORGANIZATION'S NAM	ΛE		······································	······································	- · · · · 	·	·
R							
76. INDIVIDUAL'S LAST NAME			FIRST NAME		MIDDLE	NAME	SUFFIX
Gallier			Donna		M		
c. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
108 Belford Way			Alabaster		AL	35007	US
	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION		ON 7f. JURISDICTION OF ORG	SANIZATION 7	7g. ORGANIZATIONAL ID #, if any		
	DEBTOR						NONE
. AMENDMENT (COLLATE		•					
Describe collateraldelete	ed oradded,	or give entire restated of	collateral description, or describe co	llateral assigned.			

FIRST NAME

MIDDLE NAME

SUFFIX

9b. INDIVIDUAL'S LAST NAME

10, OPTIONAL FILER REFERENCE DATA

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20090326000112650 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

13. Use this space for additional information

20140220000047110 2/2 \$.00 Shelby Cnty Judge of Probate, AL 02/20/2014 10:56:31 AM FILED/CERT

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