UCC FINANCING STATEMENT AMENDME	ENT		
FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
85167359 - 347950			
			30 1/2 \$31.00 ge of Probate AL 4:29 AM FILED/CERT
Prepared By:			12 431.00
Corporation Service Company 801 Adlai Stevenson Drive		2014032100007943	ge of Probate AL ge of Probate AL 4:29 AM FILED/CERT
Springfield, IL 62703-4261		Shelby Chty 11:4	ge of Probate
Filed In: Alaba	ama Shelby	W312	
	 _	HE ABOVE SPACE IS FOR F	ILING OFFICE USE ONLY
1a. INITIAL FINANCING STATEMENT FILE#		1b. This Fit	NANCING STATEMENT AMENDMENT is
#20090812000309470 8/12/2009		REAL E	led [for record] (or recorded) in the ESTATE RECORDS.
2. TERMINATION: Effectiveness of the Financing Statement identified about 3. CONTINUATION: Effectiveness of the Financing Statement identified.	"		
3. CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law.	above with respect to security interest(s) of the Secured Party authorizing	ng this Continuation Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b a	nd address of assignee in item 7c; and	also give name of assignor in item	9.
	Debtor or Secured Party of reco		
Also check one of the following three boxes and provide appropriate information CHANGE name and/or address: Please refer to the detailed instructions			
in regards to changing the name/address of a party.	DELETE name: Give record recor		e: Complete item 7a or 7b, and also item 7c; lete items 7e-7g (if applicable).
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME JEBCO, Inc.		- ·- · · · · · · · · · · · · · · · · ·	
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAM	1E SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAM	ME SUFFIX
7c. MAILING ADDRESS	CITY	STATE PO	STAL CODE COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e, TYPE OF ORGANIZATION			
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZ	ATION 7g. ORGANIZ	ATIONAL ID #, if any
8. AMENDMENT (COLLATERAL CHANGE); check only one box.		<u> </u>	NONE
Describe collateral deleted or added, or give entire restated colla	teral description, or describe collatera	l Passigned	
	A COUNTROLLY OF CONTROL CONTROLLER	L Lassigned.	
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AI adds collateral or adds the authorizing Debtor, or if this is a Termination and	MENDMENT (name of assignor, if this	is an Assignment). If this is an A	mendment authorized by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME ServisFirst Bank	d by a Debtor, check here and ent	er name of DEBTOR authorizing	this Amendment
SELVISE DANK			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
			- JOURTA
0.OPTIONAL FILER REFERENCE DATA 9962	<u></u>		
			85167359

FOLLOW INSTRUCTIONS (front and		IN I ADDEIDOM
11. INITIAL FINANCING STATEMEN #20090812000309470		ndment form)
12. NAME OF PARTY AUTHORIZING 12a. ORGANIZATION'S NAME Sel	IG THIS AMENDMENT (same as rvisFirst Bank	item 9 on Amendment form)
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX
13. Use this space for additional info	rmation	

20140321000079430 2/2 \$31.00 20140321000079430 2/2 \$31.00 Shelby Cnty Judge of Probate, AL 03/21/2014 11:44:29 AM FILED/CERT

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