

NAME & PHONE OF CONTACT AT FILER [optional]			• <b>-</b> 1 <b>- 1 - 1 - 1</b>
elene Armstrong 205-226-1402			
SEND ACKNOWLEDGMENT TO: (Name and Address)			
	e de la la la de la la de la la de la la de la d	3000094540 1/2 \$.00 Cnty Judge of Probate,	AL
   A 1 - 1 D	Shelby 9 04/03/2	014 08:17:59 AM FILED/	CERT
Alabama Power Company	04700		
600 18th St N Birmingham, AL 35203			
Diffillingham, AL 33203			
<u></u>	THE ABOVE S	SPACE IS FOR FILING OFFIC	F LISE ONLY
INITIAL FINANCING STATEMENT FILE #		· · · · · · · · · · · · · · · · · · ·	EMENT AMENDMENT is
20120524000184490	•	to be filed [for record] (continued in the record) (continued in the record)	•
★ TERMINATION: Effectiveness of the Financing Statement identified above	is terminated with respect to security interest(s) of t		
CONTINUATION: Effectiveness of the Financing Statement identified about	· · · · · · · · · · · · · · · · · · ·		
continued for the additional period provided by applicable law.			
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give name	e of assignor in item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment affects Do	ebtor or Secured Party of record. Check only	y one of these two boxes.	
Also check one of the following three boxes and provide appropriate information in	Land		
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	so give new DELETE name: Give record ne) in item 7c. Lobe deleted in item 6a or 6b.		item 7a or 7b, and also items 7d-7g (if applicable
CURRENT RECORD INFORMATION:	c) in item 70. Late to be deleted in item 0a of ob.	Rein 70, also complete	items /u-/y (ii applicable
6a. ORGANIZATION'S NAME	<del></del>		
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Clay	Frederick	F	
CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	Latashia	M	
Clay		07.75 1000711 0005	
Clay MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
······································	CITY Pelham	AL 35124	US
MAILING ADDRESS  114 Brook Cir  TAX ID #: SSN OR EIN   ADD'L INFO RE   7e. TYPE OF ORGANIZATION			US
MAILING ADDRESS 114 Brook Cir	Pelham	AL 35124	US

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM!

OL	LOW INSTRUCTIONS (front and back	k) CAREFULLY			
11.	INITIAL FINANCING STATEMENT F 20120524000184490	ILE # (same as item 1a on Ame	endment form)		
12.	NAME OF PARTY AUTHORIZING T 12a. ORGANIZATION'S NAME	HIS AMENDMENT (same as	item 9 on Amendment form)		
OR	Alabama Power Company				
UK	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX		

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13. Use this space for additional information

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