UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] **CINDY THOMAS 205-326-8299**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

ALABAMA GAS CORPORATION 605 RICHARD ARRINGTON JR BLVD N

BIRMINGHAM, AL 35203

Shelby Cnty Judge of Probate, AL 04/25/2014 10:35:44 AM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEB	TOR'S EXACT FU	LL LEGAL NAME -	insert only <u>one</u> debtor name (1a or 1b	o) - do not abbreviate or combine names			
1a. C	ORGANIZATION'S NA	AME					
OR 16.11	NDIVIDUAL'S LAST N	AME		FIRST NAME	MIDDLE	NAME	SUFFIX
E	THERIDGE			SUZANNA	E		
	NG ADDRESS		<u> </u>	CITY	STATE	POSTAL CODE	COUNTRY
108 V	VILLOW CR	EEK SOUTF	ILN	ALABASTER	\mathbf{AL}	35007-9057	US
	NSTRUCTIONS	ADD'L INFO RE	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION	1g. ORG	ANIZATIONAL ID #, if any	
Not A	Applicable	ORGANIZATION DEBTOR	· 				NONE
2. ADDI	TIONAL DEBTOR	R'S EXACT FULL	LEGAL NAME - insert only one	debtor name (2a or 2b) - do not abbreviate or com	ibine names		
2a. 0	ORGANIZATION'S NA	AME					
OR 2b. I	NDIVIDUAL'S LAST I	NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
2c. MAILI	NG ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
2d. SEE]	NSTRUCTIONS	ADD'L INFO RE ORGANIZATION	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION	2g. ORG.	ANIZATIONAL ID #, if any	
Not A	Applicable	DEBTOR					NONE
3. SEC	JRED PARTY'S	NAME (or NAME of)	TOTAL ASSIGNEE of ASSIGNOR S/	P) - insert only <u>one</u> secured party name (3a or 3b)			
	ORGANIZATION'S NA		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		
A	LABAMA GA	AS CORPOR	ATION				
OR 3b. I	NDIVIDUAL'S LAST I	NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
3c. MAILI	NG ADDRESS			CITY	STATE	POSTAL CODE	COUNTRY
605 R	ICHARD AR	RRINGTON J	JR BLVD N	BIRMINGHAM	AL	35203	US
1 This El	NANCING STATEME	NIT and the fallow	ing colletoral:				

4. This FINANCING STATEMENT covers the following collateral:

GAS FURNACE M# N8MSN0701412A2 S# A134614373

\$5000.00

5. ALTERNATIVE DESIGNATION [if applicable]:	LESSEE/LESSOR CONSIGN	NEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-I	JCC FILING
6. This FINANCING STATEMENT is to be filed ESTATE RECORDS. Attach Addendum	[for record] (or recorded) in the REAL [if applicable		EST SEARCH REPO EEI	RT(S) on Debtor(s) [optional]	All Debtors	Debtor 1	Debtor 2
8. OPTIONAL FILER REFERENCE DATA		•					

IAVIAIC OI I II/OI DEDI OI/ (IROI I	Ib) ON RELATED FINANCING	STATEMENT			
9a. ORGANIZATION'S NAME					
					8 50
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX	Chalby C	000121620 2/2 \$3 nty Judge of Pro	pate, HL
ETHERIDGE	SUZANNA	\mathbf{E}	04/25/20	14 10:35:44 AM F	ILED/CERT
).MISCELLANEOUS:					
1. ADDITIONAL DEBTOR'S EXACT	FULL LEGAL NAME - insert only			IS FOR FILING OFFI	CE USE ONLY
R 11b. INDIVIDUAL'S LAST NAME	· · · · · · · · · · · · · · · · · · ·	FIRST NAME	MIDDLE	NAME	SUFFIX
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
C. WALLING ADDINESS			1		1
d. <u>SEEINSTRUCTIONS</u> ADD'L INFO	L. Company of the com	N 11f. JURISDICTION OF ORGANIZAT	TION 11g. OR	GANIZATIONAL ID #, if a	
d. <u>SEE INSTRUCTIONS</u> Not Applicable DEBTOR	ION '		l	GANIZATIONAL ID #, if a	ny
d. <u>SEEINSTRUCTIONS</u> ADD'L INFO	ION '	N 11f. JURISDICTION OF ORGANIZAT /P'S NAME - insert only one name (12a)	l	GANIZATIONAL ID #, if a	
d. SEEINSTRUCTIONS Not Applicable DEBTOR ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME	ION '		l	GANIZATIONAL ID #, if a	
d. SEEINSTRUCTIONS Not Applicable DEBTOR ADDITIONAL SECURED PAR	ION '		l		
d. SEE INSTRUCTIONS Not Applicable ORGANIZATIONED DEBTOR ADDITIONAL SECURED PARE 12a. ORGANIZATION'S NAME PERFECT SERVICE	ION '	/P'S NAME - insert only <u>one</u> name (12a	or 12b)		
d. SEE INSTRUCTIONS Not Applicable ORGANIZATIONED DEBTOR ADDITIONAL SECURED PARE 12a. ORGANIZATION'S NAME PERFECT SERVICE	ION '	/P'S NAME - insert only <u>one</u> name (12a	or 12b)		
d. SEE INSTRUCTIONS Not Applicable ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME PERFECT SERVICE 12b. INDIVIDUAL'S LAST NAME	ION '	/P'S NAME - insert only <u>one</u> name (12a	or 12b)	NAME	SUFFIX
d. SEEINSTRUCTIONS Not Applicable ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME PERFECT SERVICE 12b. INDIVIDUAL'S LAST NAME c. MAILING ADDRESS	TY'S or ASSIGNORS timber to be cut or as-extractions.	/P'S NAME - insert only one name (12a of the series) FIRST NAME CITY IRONDALE	or 12b) MIDDLE STATE AL	NAME POSTAL CODE	SUFFIX
d. SEEINSTRUCTIONS Not Applicable ADDITIONAL SECURED PAR 12a. ORGANIZATION'S NAME PERFECT SERVICE 12b. INDIVIDUAL'S LAST NAME C. MAILING ADDRESS 865 OLD LEEDS RD 3. This FINANCING STATEMENT covers collateral, or is filed as a fixture filing fixture filing. Description of real estate: 08 WILLOW CREEK SOU	timber to be cut or as-extractions. TH LN 57 SOUTH E 102 1.000	/P'S NAME - insert only one name (12a of the series) FIRST NAME CITY IRONDALE	or 12b) MIDDLE STATE AL	NAME POSTAL CODE	SUFFIX

18. Check only if applicable and check only one box.

Filed in connection with a Manufactured-Home Transaction — effective 30 years

Filed in connection with a Public-Finance Transaction — effective 30 years

Debtor is a TRANSMITTING UTILITY