

DLLOW INSTRUCTIONS (front and back) CAREFULLY				
NAME & PHONE OF CONTACT AT FILER (optional)				
elene Armstrong 205-226-1402 SEND ACKNOWLEDGMENT TO: (Name and Address)				
				
Alabama Power Company 600 18th St N		n m (m n n n m l m)		1
Birmingham, AL 35203				
		20170505000133590) 1/2 \$.00	
		Shelby Cnty Judge 05/05/2014 02:32:	of Probate, HL 47 PM FILED/CERT	•
		05/05/2014 02.02.		
		THE ABOVE SPACE IS FO	S FINANCING STATEMEN	······································
INITIAL FINANCING STATEMENT FILE # 200902260000690	040	to I	e filed [for record] (or rec	
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respec			AL ESTATE RECORDS. rty authorizing this Termina	ition Statement.
CONTINUATION: Effectiveness of the Financing Statement in				
continued for the additional period provided by applicable law.	•			
ASSIGNMENT (full or partial): Give name of assignee in item 7	7a or 7b and address of assignee in item 7c; a	nd also give name of assignor in	item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment aff	fects Debtor or Secured Party of re	cord. Check only one of these	two boxes.	
Also check one of the following three boxes and provide appropriate in		ne: Give record name	DD name: Complete item i	7a or 7h. and also
CHANGE name and/or address: Give current record name in item name (if name change) in item 7a or 7b and/or new address (if add			m 7c; also complete items	•
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME		·		
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
Miller	Sherrod	Edwi	n	Jr
CHANGED (NEW) OR ADDED INFORMATION:				
7a. ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·	······································	
3	· • · · · · · · · · · · · · · · · · · ·		_· <u>·</u> ····	
`7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
Miller	Laine		<u> </u>	00144704
: MAILING ADDRESS	CITY	STATE A I	POSTAL CODE	COUNTRY
MAILING ADDRESS 1069 Village Trl	City Calera	AL	35040	US
. MAILING ADDRESS 1069 Village Trl 3. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION	City Calera	AL		US
MAILING ADDRESS 1069 Village Trl TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION DEBTOR	CITY Calera IIZATION 71. JURISDICTION OF ORGA	AL	35040	US
MAILING ADDRESS 1069 Village Trl I. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box	Calera IIZATION 7f. JURISDICTION OF ORGA	AL NIZATION 7g. ORG	35040	US
MAILING ADDRESS 1069 Village Trl 1. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION	Calera IIZATION 7f. JURISDICTION OF ORGA	AL NIZATION 7g. ORG	35040	US
MAILING ADDRESS 1069 Village Trl TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box	Calera IIZATION 7f. JURISDICTION OF ORGA	AL NIZATION 7g. ORG	35040	US
MAILING ADDRESS 1069 Village Trl TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box	Calera IIZATION 7f. JURISDICTION OF ORGA	AL NIZATION 7g. ORG	35040	US
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MAILING ADDRESS 1069 Village Trl TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added, or give entire rest	CITY Calera IIZATION 7f. JURISDICTION OF ORGA t. tated collateral description, or describe colla	AL NIZATION 7g. ORG	35040 SANIZATIONAL ID #, if any	US
MAILING ADDRESS 1069 Village TrI I. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added, or give entire restricted rest	CITY Calera IIZATION 7f. JURISDICTION OF ORGA t. tated collateral description, or describe colla G THIS AMENDMENT (name of assignor,	AL NIZATION 7g. ORG teral assigned.	SANIZATIONAL ID #, if any	US
MAILING ADDRESS 1069 Village Trl I. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added, or give entire resident.	CITY Calera IIZATION 7f. JURISDICTION OF ORGA t. tated collateral description, or describe colla G THIS AMENDMENT (name of assignor,	AL NIZATION 7g. ORG teral assigned.	SANIZATIONAL ID #, if any	US
NAME OF SECURED PARTY OF RECORD AUTHORIZING adds collateral or adds the authorizing Debtor, or if this is a Termination 9a. ORGANIZATION'S NAME	CITY Calera IIZATION 7f. JURISDICTION OF ORGA t. tated collateral description, or describe colla G THIS AMENDMENT (name of assignor,	AL NIZATION 7g. ORG teral assigned.	SANIZATIONAL ID #, if any	US NO
NAME OF SECURED PARTY OF RECORD AUTHORIZING adds collateral or adds the authorizing Debtor, or if this is a Terminatic	CITY Calera IIZATION 7f. JURISDICTION OF ORGA t. tated collateral description, or describe colla G THIS AMENDMENT (name of assignor,	AL NIZATION 7g. ORG teral assigned.	SANIZATIONAL ID #, if any orizing this Amendment.	US

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

TOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)

20090226000069040

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

12a. ORGANIZATION'S NAME

Alabama Power Company

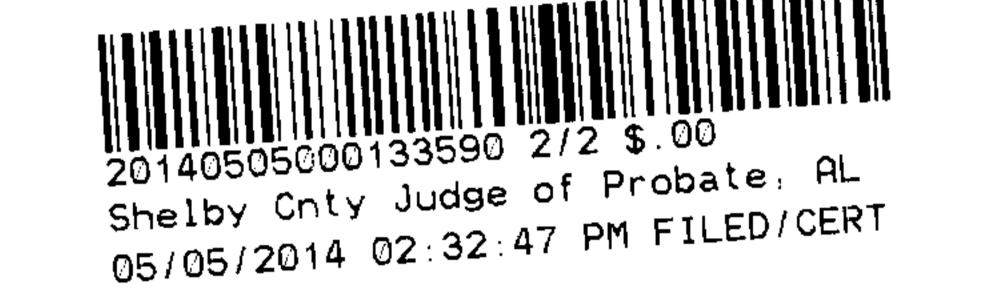
OR

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

13. Use this space for additional information



THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY