C FINANCING STATEMENT AMENDME	NT	20140808000246720 1/	
LOW INSTRUCTIONS (front and back) CAREFULLY		Shelby Cnty Judge of 08/08/2014 10:56:04	Probate, AL
NAME & PHONE OF CONTACT AT FILER [optional]		06/06/2014 10.00.0	
lene Armstrong 205-226-1402 SEND ACKNOWLEDGMENT TO: (Name and Address)			
I Alabama Power Company			
600 18th St N			
Birmingham, AL 35203			
ENTIAL CINIANIOUNIO CTATENICNIT CIUC #	THE ABOV	E SPACE IS FOR FILING OFFICE U	
INITIAL FINANCING STATEMENT FILE # 20120801000279760		to be filed [for record] (or re REAL ESTATE RECORDS.	
★ TERMINATION: Effectiveness of the Financing Statement identified above	ve is terminated with respect to security interest(s)		nation Statement.
CONTINUATION: Effectiveness of the Financing Statement identified a	above with respect to security interest(s) of the S	Secured Party authorizing this Continuation	Statement is
continued for the additional period provided by applicable law.			
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b ar			
AMENDMENT (PARTY INFORMATION): This Amendment affects Also check one of the following three boxes and provide appropriate information		only <u>one</u> of these two boxes.	
CHANGE name and/or address: Give current record name in item 6a or 6b; name (if name change) in item 7a or 7b and/or new address (if address change)	also give new DELETE name: Give reco	• • • • • • • • • • • • • • • • • • •	7a or 7b, and also ns 7d-7g (if applicable)
CURRENT RECORD INFORMATION:			
6a. ORGANIZATION'S NAME			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Siegel	Howard	J	
CHANGED (NEW) OR ADDED INFORMATION:	- · · · · · · · · · · · · · · · · · · ·		······································
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Lyman	Janet		
MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
2124 Bailey Brook Dr	Hoover	AL 35244	US
TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if ar	·
DEBTOR AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box.			NON
Describe collateral deleted or added, or give entire restated colla	ateral description, or describe collateral ass	igned.	
Shame? termed			
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	·	-	ed by a Debtor which
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A adds collateral or adds the authorizing Debtor, or if this is a Termination authorizing Decomposition of the collateral or adds the the collateral or	·	-	ed by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorize	·	-	ed by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized. 9a. ORGANIZATION'S NAME	·	-	ed by a Debtor which

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

20120801000279760

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

12a. ORGANIZATION'S NAME

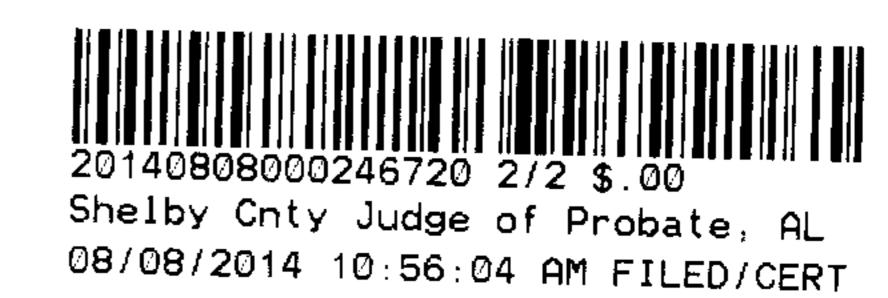
Alabama Power Company

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