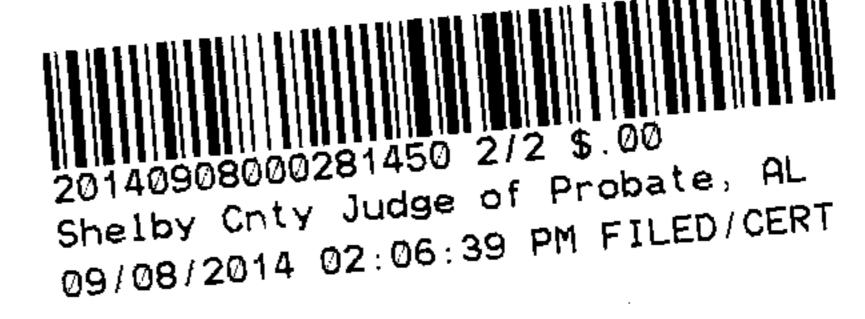


DLLOW INSTRUCTIONS (front and back) CAREFULLY			
NAME & PHONE OF CONTACT AT FILER [optional] Selene Armstrong 205-226-1402			
SEND ACKNOWLEDGMENT TO: (Name and Address)			
Alabama Power Company		20140908000281450 1/2 \$.00	
600 18th St N		Shelby Cnty Judge of Probate,	AL
Birmingham, AL 35203		09/08/2014 02:06:39 PM FILED/C	ERT
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. INITIAL FINANCING STATEMENT FILE #		ABOVE SPACE IS FOR FILING OFFICE L  1b. This FINANCING STATEM	
201102090000	47370	to be filed [for record] (or re	ecorded) in the
★ TERMINATION: Effectiveness of the Financing Statement is	identified above is terminated with respect to security inter	rest(s) of the Secured Party authorizing this Term	
CONTINUATION: Effectiveness of the Financing Stateme continued for the additional period provided by applicable law		Tine Secured Party authorizing this Continuation	Statement is
ASSIGNMENT (full or partial): Give name of assignee in ite	em 7a or 7h and address of assigned in item 7o; and also	give name of accionar in item 0	
AMENDMENT (PARTY INFORMATION): This Amendment Also check one of the following three boxes and provide appropriate		Check only <u>one</u> of these two boxes.	
CHANGE name and/or address: Give current record name in i		re record name	n 7a or 7b, and also
name (if name change) in item 7a or 7b and/or new address (if	f address change) in item 7c. to be deleted in item		ns 7d-7g (if applica
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Erwin  CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  Erwin  MAILING ADDRESS	FIRST NAME Amanda CITY	MIDDLE NAME  D  STATE POSTAL CODE	COUNTRY
Erwin  CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S LAST NAME  Erwin  MAILING ADDRESS  32 Oakdale Dr	FIRST NAME  Amanda  CITY  Montevallo	MIDDLE NAME  D  STATE POSTAL CODE  AL 35115	COUNTRY
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## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20110209000047370 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