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OLLOW INSTRUCTIONS (front and back) CAREFULLY				
NAME & PHONE OF CONTACT AT FILER [optional]				
Selene Armstrong 205-226-1402  3. SEND ACKNOWLEDGMENT TO: (Name and Address)				
rockiessy				<b></b>
Alabama Power Company				
600 18th St N		_	281460 1/2 \$.00 Judge of Probat	
Birmingham, AL 35203		Shelby Onc.	02:06:40 PM FILE	D/CERT
	<b>!</b>			
		BOVE SDACE I	S FOR FILING OFFICE	THE ONLY
. INITIAL FINANCING STATEMENT FILE#		1b.		
201305140002003	80		to be filed [for record] (or REAL ESTATE RECORD	r recorded) in the
★ TERMINATION: Effectiveness of the Financing Statement identified	fied above is terminated with respect to security inter-	est(s) of the Secure		
CONTINUATION: Effectiveness of the Financing Statement ide				
continued for the additional period provided by applicable law.		and december any	admonizing this continuati	ion otatoment is
ASSIGNMENT (full or partial): Give name of assignee in item 7a	a or 7b and address of assignee in item 7c; and also	give name of assign	or in item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment affe				
Also check one of the following three boxes and provide appropriate info	lament		<del></del>	
CHANGE name and/or address: Give current record name in item 6 name (if name change) in item 7a or 7b and/or new address (if address)	fa or 6b; also give new DELETE name: Give ress change) in item 7c. to be deleted in item (	•	ADD name: Complete it	tem 7a or 7b, and also
CURRENT RECORD INFORMATION:	ess change) in item 70 to be deleted in item	oa or op.	item 7c; also complete i	tems /u-/g (ir applica
6a. ORGANIZATION'S NAME		·	······································	· · · · · · · · · · · · · · · · · · ·
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MID	DLE NAME	SUFFIX
Sellers	Dioindra	P		
CHANGED (NEW) OR ADDED INFORMATION:		······································		:
7a. ORGANIZATION'S NAME				······································
R				
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MID	DLE NAME	SUFFIX
. MAILING ADDRESS	CITY	STA	TE POSTAL CODE	COUNTRY
137 Horseshoe Cir	Alabaster	AI	J 35007	US
. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZ ORGANIZATION	ZATION 7f. JURISDICTION OF ORGANIZATIO	N 7g.	ORGANIZATIONAL ID #, if	any
DEBTOR				Пм
AMENDMENT (COLLATERAL CHANGE): check only one box.				1/4
Describe collateral deleted or added, or give entire restat		assigned.		
	, , ,	]g		
NAME OF SECURED PARTY OF RECORD AUTHORIZING	THIS AMENDMENT (name of assignor, if this is a	n Assignment). If t	his is an Amendment autho	rized by a Debtor whic
adds collateral or adds the authorizing Debtor, or if this is a Termination	THIS AMENDMENT (name of assignor, if this is a authorized by a Debtor, check here and enter na	n Assignment). If t	nis is an Amendment autho authorizing this Amendment	rized by a Debtor whic
9a. ORGANIZATION'S NAME	THIS AMENDMENT (name of assignor, if this is a authorized by a Debtor, check here and enter na	n Assignment). If t me of DEBTOR a	his is an Amendment autho nuthorizing this Amendment	rized by a Debtor which
9a. ORGANIZATION'S NAME  Alabama Power Company	THIS AMENDMENT (name of assignor, if this is a authorized by a Debtor, check here and enter na	n Assignment). If t me of DEBTOR a	his is an Amendment autho nuthorizing this Amendment	rized by a Debtor which
	THIS AMENDMENT (name of assignor, if this is a authorized by a Debtor, check here and enter na	me of DEBTOR a	nis is an Amendment autho nuthorizing this Amendment	rized 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) 20130514000200380 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



Shelby Cnty Judge of Probate, AL 09/08/2014 02:06:40 PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

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