AAILING ADDRESS 075 Bush Ave Leeds AL 35094 US AX ID #: SSN OR EIN ORGANIZATION DEBTOR ORGANIZATION DEBTOR ORGANIZATION TAX ID #: SSN OR EIN DEBTOR ORGANIZATION ORGANIZATION ORGANIZATION TOTAL CODE COUNT ALL ODE TOWN TO THE POSTAL CODE ALL ODE TOWN TO THE POSTAL CODE TOWN TOWN TO THE POSTAL CODE TOWN TO T	elene Armstrong 20	NTACT AT FILER [optional] 5-226-1402 ENT TO: (Name and Address)					
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10. OPTIONAL FILER REFERENCE DATA

FIRST NAME

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SUFFIX

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 2090602000209250 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR Alabama Power Company 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

20140908000281500 2/2 \$.00 Shelby Cnty Judge of Probate, AL 09/08/2014 02:06:44 PM FILED/CERT

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