

	STATEMENT AMENDMEN	JT .				
	(front and back) CAREFULLY ONTACT AT FILER [optional]					
Selene Armstrong 2						
	MENT TO: (Name and Address)			2014		
					0925000300780 1 by Chty Judge c	_
A labama Dave	· · · · · · · · · · · · · · · · · · ·					AM FILED/CERT
Alabama Pow 600 18th St N	1 7					
Birmingham,						
]						
<u> </u>		TH	E ABOVE SPA	CE IS FO	OR FILING OFFICE	IISE ONI Y
1a. INITIAL FINANCING STATE					is FINANCING STATE	
	20090623000241010				be filed [for record] (or : AL ESTATE RECORDS	_
2. TERMINATION: Effe	ctiveness of the Financing Statement identified above i	is terminated with respect to security i	nterest(s) of the S			
3. CONTINUATION: E	fectiveness of the Financing Statement identified about the period provided by applicable law.					
4. ASSIGNMENT (full or	partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and a	lso give name of a	essignor in	item 9.	
		ebtor or Secured Party of record		· · · · · · · · · · · · · · · · · · ·		
	ng three boxes <u>and</u> provide appropriate information in		ondok omy <u>om</u> c	2 01 111050	THO DONES.	
CHANGE name and/or a	ddress: Give current record name in item 6a or 6b; als n item 7a or 7b and/or new address (if address change	*			DD name: Complete ite	m 7a or 7b, and also
6. CURRENT RECORD INF		e) in item 7c to be deleted in it	em ba or bb.	lite	em /c; also complete ite	ms 7d-7g (if applicable).
6a. ORGANIZATION'S NA	ME		<u></u>		······································	
OD						
6b. INDIVIDUAL'S LAST NAME		FIRST NAME Sheridane		MIDDLE NAME		SUFFIX
Reese	Reese			L		
7. CHANGED (NEW) OR AD	DED INFORMATION:			· *		
7a. ORGANIZATION'S NA	ME			· · · · · · · · · · · · · · · · · · ·		
OR -						
7b. INDIVIDUAL'S LAST N	NAME	FIRST NAME	•	MIDDLE	NAME	SUFFIX
2 14111110 15555						
7c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
125 W Stonehaven		Pelham	·········	AL	35124	US
7d. TAX ID #: SSN OR EIN	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZA	ATION	7g. ORG	ANIZATIONAL ID #, if a	iny
	DEBTOR					NONE
	ERAL CHANGE): check only one box.					
Describe collateral delet	ted or added, or give entire restated collaters	al description, or describe collateral	assigned.			

9. NAME OF SECURED PARTY OF RECORD AUTHOrizing Debtor, or if this is a T	ORIZING THIS AMENDMENT (name of assignor, if this ermination authorized by a Debtor, check here and entermination authorized by a Debtor, check here	is an Assignment). If this is an Amendment au er name of DEBTOR authorizing this Amendm	ithorized by a Debtor which
9a. ORGANIZATION'S NAME Alabama Power Company			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10, OPTIONAL FILER REFERENCE DATA			

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20090623000241010 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

20140925000300780 2/2 \$.00 Shelby Cnty Judge of Probate, AL 09/25/2014 10:54:38 AM FILED/CERT

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY