UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS	20°, 1.2°, 1.3°,			
A. NAME & PHONE OF CONTACT AT FILER (optional) CINDY THOMAS 205-326-8299				
B. E-MAIL CONTACT AT FILER (optional)				
Cindy.Thomas@alagasco.com		20141013000 Shelby Cnty	322920 1/2 \$38.50 Judge of Probate	AL
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	· · · · · · · · · · · · · · · · · · ·	10/13/2014	12:17:09 PM FILED	CERT
ALABAMA GAS CORPORATION 2101 6TH AVE NORTH BIRMINGHAM, AL 35203				
	THE	ABOVE SPACE IS FO	OR FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, name will not fit in line 1b, leave all of item 1 blank, check here and provide only one Debtor name (1a or 1b) (use exact, name will not fit in line 1b, leave all of item 1 blank, check here and provide only one Debtor name (1a or 1b) (use exact, name will not fit in line 1b, leave all of item 1 blank, check here and provide only one Debtor name (1a or 1b) (use exact, name will not fit in line 1b, leave all of item 1 blank, check here. 1a. ORGANIZATION'S NAME	full name; do not omit, modify, or abbrevide the Individual Debtor information in it	viate any part of the Debto tem 10 of the Financing S	r's name); if any part of the International transfer of the Internation	ndividual Debtor's
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
TAPIA	JEFFREY	N	N	
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3144 SUNNY MEADOWS LN	BIRMINGHAM	AL	35242-3434	US
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, name will not fit in line 2b, leave all of item 2 blank, check here and provide only one Debtor name (2a or 2b) (use exact, name will not fit in line 2b, leave all of item 2 blank, check here and provide only one Debtor name (2a or 2b) (use exact, name will not fit in line 2b, leave all of item 2 blank, check here and provide only one Debtor name (2a or 2b) (use exact, name will not fit in line 2b, leave all of item 2 blank, check here. 2a. ORGANIZATION'S NAME	full name; do not omit, modify, or abbrevide the Individual Debtor information in i	viate any part of the Debto item 10 of the Financing S	r's name); if any part of the li tatement Addendum (Form U	ndividual Debtor's ICC1Ad)
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX

OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) S		SUFFIX
TAPIA	JEFFREY	N		
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3144 SUNNY MEADOWS LN	BIRMINGHAM	AL	35242-3434	US
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2 name will not fit in line 2b, leave all of item 2 blank, check here		ny part of the Debtor of the Financing St	's name); if any part of the Ir atement Addendum (Form U	ndividual Debtor
2a. ORGANIZATION'S NAME		<u>-</u>		<u>. </u>
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of	f ASSIGNOR SECURED PARTY): Provide only one Secured F	Party name (3a or 3	<u>)</u>	
3a. ORGANIZATION'S NAME	~ ▶ ₹			
ALABAMA GAS CORPORATION	ON			
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		SUFFIX
		07.75	DOCTAL CODE	COLINITON
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2101 6TH AVE NORTH	BIRMINGHAM	AL	35203	US

4. COLLATERAL: This financing statement covers the following collateral:

YORK CONDENSER AND COIL M# YCJD36S41 S# W1G48587S1 M# NC43C S# W1F4837843

\$5000.00

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative
6a. Check only if applicable and check only one box:	6b. Check only if applicable and check only one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy	rer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME Shelby Cnty Judge of Probate: AL 10/13/2014 12:17:09 PM FILED/CERT 9b. INDIVIDUAL'S SURNAME **TAPIA** FIRST PERSONAL NAME **JEFFREY** SUFFIX ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME **SUFFIX** INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) COUNTRY POSTAL CODE STATE CITY 10c. MAILING ADDRESS ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME ONE SOURCE HEATING SUFFIX ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME 11b. INDIVIDUAL'S SURNAME COUNTRY STATE POSTAL CODE CITY 11c. MAILING ADDRESS US 35215 AL **BIRMINGHAM** 4400 PINSON VALLEY PKWY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) is filed as a fixture filing covers as-extracted collateral covers timber to be cut 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): 3144 SUNNY MEADOWS LN BIRMINGHAM, AL 35242-3434 LEGAL DESCRIPTION LOT 19 BLOCK 4 SUNNY MEADOWS MAP BOOK 08 MAP PAGE 018 **DEED BOOK 2003 DEED PAGE 0694640** PARCEL # 10 6 14 0 002 049.000 SHELBY COUNTY, ALABAMA

International Association of Commercial Administrators (IACA)

17. MISCELLANEOUS: