

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY	
A. NAME & PHONE OF CONTACT AT FILER [optional]	
Selene Armstrong 205-226-1402	
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
	······
Alabama Power Company	1
600 18th St N	
Birmingham, AL 35203	

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	600 18th St N				
	Birmingham, AL 35203				
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L		THE ABOVE	SPACE IS FO	R FILING OFFICE U	SE ONLY
1a. i	INITIAL FINANCING STATEMENT FILE # 20120914000351340		to t	s FINANCING STATEME be filed (for record) (or re AL ESTATE RECORDS.	
2.	★ TERMINATION: Effectiveness of the Financing Statement identified above in the Financing Statement identified above i	is terminated with respect to security interest(s) of	the Secured Pa	rty authorizing this Termi	nation Statement.
3.	CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law.	ove with respect to security interest(s) of the Sec	ured Party auth	orizing this Continuation	Statement is
4.	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give nam	e of assignor in	item 9.	
5. /		ebtor or Secured Party of record. Check on			
	السنا Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in i				
ſ	CHANGE name and/or address: Give current record name in item 6a or 6b; als			D name: Complete item	7a or 7b, and also
6.	name (if name change) in item 7a or 7b and/or new address (if address change CURRENT RECORD INFORMATION:	e) in item 7c. Lobe deleted in item 6a or 6b	. Ite	m 7c; also complete item	is /d-/g (if applicable).
	6a. ORGANIZATION'S NAME	.			
OR	6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
	Harper	Gregory	S		
7.	CHANGED (NEW) OR ADDED INFORMATION:				
	7a. ORGANIZATION'S NAME		·		······································
OR	7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
	Harper	Charman	C		
7c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1	636 Park Forest Lane	Alabaster	AL	35007	US
7d.	TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORG	 ANIZATIONAL ID #, if ar	
	ORGANIZATION DEBTOR				
8	AMENDMENT (COLLATERAL CHANGE): check only one box.	· · · · · · · · · · · · · · · · · · ·			NONE
•	Describe collateral deleted or added, or give entire restated collater	ral description, or describe collateral lassion	ed		
		a decemplion, or decembe control [[december]	.		
		in the second of			

9. 1	NAME OF SECURED PARTY OF RECORD AUTHOrizing Debtor, or if this is a To	ORIZING THIS AMENDMENT (name of assignor, if this in ermination authorized by a Debtor, check here and entermination authorized by a Debtor, check here	is an Assignment). If this is an Amendment autonome of DEBTOR authorizing this Amendm	thorized by a Debtor which ent.		
	9a. ORGANIZATION'S NAME Alabama Power Company					
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		
10.9	OPTIONAL FILER REFERENCE DATA			<u> </u>		

UCC FINANCING STATEMENT AMENDMENT ADDENDUM I

FOLLOW INSTRUCTIONS (front and	back) CAREFULLY	
11. INITIAL FINANCING STATEMEN 2012091400035134		endment form)
12. NAME OF PARTY AUTHORIZING 12a. ORGANIZATION'S NAME Alabama Power Company		item 9 on Amendment form)
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME,SUFFIX

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13. Use this space for additional information

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