A. NAME & PHONE OF CONTACT AT FILER [optional] Selene Armstrong 205-226-1402 B. SEND ACKNOWLEDGMENT TO: (Name and Address)			20141023000334830 1/2 \$.00			
	Alabama Power Company 600 18th St N Birmingham, AL 35203			Sueli	Oy Cnty Judge of 3/2014 11:21:25	Probate of
			THE ABOVE S		R FILING OFFICE US	
a. II	NITIAL FINANCING STATEMENT FILE # 20120801000279800			to t	s FINANCING STATEME be filed [for record] (or rec AL ESTATE RECORDS.	
	TERMINATION: Effectiveness of the Financing Statement identified about	·		ne Secured Pa	rty authorizing this Termin	
	CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law.	above with respect to se	curity interest(s) of the Secu	red Party auth	orizing this Continuation	Statement is
7	ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b a	and address of assignee i	n item 7c; and also give name	of assignor in	item 9.	
A	MENDMENT (PARTY INFORMATION): This Amendment affects					
A	lso check one of the following three boxes and provide appropriate information	n in items 6 and/or 7.				77 b
	CHANGE name and/or address: Give current record name in item 6a or 6b name (if name change) in item 7a or 7b and/or new address (if address cha	; also give new ange) in item 7c.	ELETE name: Give record no be deleted in item 6a or 6b.	ame Al ite	DD name: Complete item m 7c; also complete item	7a or 7b, and also s 7d-7g (if applical
	URRENT RECORD INFORMATION:			······································	····	
	6a. ORGANIZATION'S NAME					
ا ج	6b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE	NAME	SUFFIX
	Roberts	Kevin			, <u> </u>	
	CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	<u>. </u>				
			· · · · · · · · · · · · · · · · ·	MIDDLE	NAME	SUFFIX
R	7b. INDIVIDUAL'S LAST NAME	FIRST NAME		!		1
	7b. INDIVIDUAL'S LAST NAME Roberts	FIRST NAME Michelle				
				STATE	POSTAL CODE	
	Roberts	Michelle		STATE	POSTAL CODE 35007	COUNTRY
:. I	Roberts MAILING ADDRESS 12 Park Place Lane TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	Michelle CITY Alabaster	N OF ORGANIZATION	AL	1	USA
;. l]	Roberts MAILING ADDRESS 112 Park Place Lane TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	Michelle CITY Alabaster	N OF ORGANIZATION	AL	35007	<u></u>
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UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20120801000279800 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

20141023000334830 2/2 \$.00 Shelby Cnty Judge of Probate, AL 10/23/2014 11:21:25 AM FILED/CERT

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY