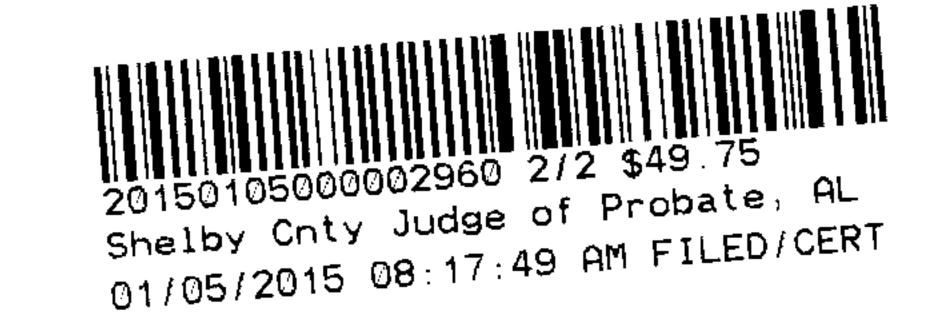


Shelby Cnty Judge of Probate, AL

01/05/2015 08:17:49 AM FILED/CERT **UCC FINANCING STATEMENT** FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) B. E-MAIL CONTACT AT FILER (optional) collections@microf.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) MICROF LLC PO BOX 70085 ALBANY GA 31708 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a. ORGANIZATION'S NAME 1b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Andri Turner 1c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 2353 Forest Lakes Lane 35147 Sterrett AL USA 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Turner Latonya 2c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY USA AL 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME MICROF LLC 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 3c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY PO BOX 70085 Albany 31708 USA GA 4. COLLATERAL: This financing statement covers the following collateral: All of the Debtor's right, title and interest, now existing and hereafter arising, in and to all of the Equipment subject to that certain Lease No. RTO-13255 between Debtor as Lessee and Microf, LLC as Lessor, (ii) all insurance, warranty, rental and other claims and rights to payment and chattel paper arising out of such Equipment, (iii) all books, records and proceeds relating to the foregoing, and (iv) any other property or rights to which the Lessee may be or become entitled by reason of Lessee's interest in the Equipment. For the purposes of this financing statement, "Equipment" shall be further described in item 16 of the UCC1Ad attached hereto, and includes all substitutions, replacements, upgrades, repairs, parts and attachments, improvements and accessions thereto. THIS FILING IS FOR PRECAUTIONARY AND INFORMATIONAL PURPOSES ONLY. THE PARTIES CONSIDER THIS TRANSACTION TO BE A TRUE LEASE. LESSEE HAS NO RIGHT TO SELL OR PLEDGE THE EQUIPMENT, IT IS OWNED BY LESSOR AND LEASED TO LESSEE.

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 Selfer/Buy	/er Bailee/Bailor Licensee/Licensor			
8. OPTIONAL FILER REFERENCE DATA: The total cost of the lease is \$ 12415.79				



## UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS							
9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if because Individual Debtor name did not fit, check here	line 1b was left b	olank					
9a. ORGANIZATION'S NAME							
· · · · · · · · · · · · · · · · · · ·	· · · • • • • · · · •						
OD	<u>.                                    </u>	<u> </u>					
9b. INDIVIDUAL'S SURNAME							
Turner	· <u>·</u>	<del> </del>					
FIRST PERSONAL NAME  Andri							
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX					
			THE ABOVE	SPACE	IS FOR FILING OFFICE	LISE ONLY	
10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or	Debtor name tha	at did not fit in line				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the ma				Ü	, , ,	•	
10a. ORGANIZATION'S NAME					··- ··		
OR					· · · <u>-</u>		
10b. INDIVIDUAL'S SURNAME							
INDIVIDUAL'S FIRST PERSONAL NAME	<del> </del>				<u> </u>		
INDIVIDUAL OF INCOUNT INTO INTO INTO INTO INTO INTO INTO IN							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX	
10c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY	
				AL		USA	
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGN	NOR SECUF	RED PARTY	S NAME: Provide o	nly o <u>ne n</u> an	ne (11a or 11b)		
11a. ORGANIZATION'S NAME							
OR 11b. INDIVIDUAL'S SURNAME	TEIDET DEDE	SONAL NAME	<u> </u>	LADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
TID. HADIAIDOAL S SOLVIANIE	I IIIO I I CINC	OHAL HANK			INAL INAME(O)/INTTIAL(O)	JOHN	
11c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY	
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):							
2014 BRYANT Air Handler M# FB4CNF036T00 S# 4	214A6888	4					
2014 DDWANT Hoof Dumm Condomnon M# 212CN A02	Z0000 C# .	451 4TC1 40 <b>3</b>	4				
2014 BRYANT Heat Pump Condenser M# 213CNA03	00000 5# 4	4514E149Z	4				
2014 BRYANT Heat Strips M# FB410CB S# 24508900	05006						
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINA	14. This FINANCING STATEMENT:					
REAL ESTATE RECORDS (if applicable)	Cove	covers timber to be cut covers as-extracted collateral is filed as a fixture filing					
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	16. Description of real estate:						
	Lot#:21	9 Map Boo	k:32 Pg:26 St	ıb:FOI	REST LAKES SE	CTOR 3	
	PHASE 2 FINAL PLAT DEED BOOK:2006 PAGE:1027000531820						
	Shelby	County Ala	abama				
		<u>-</u>			**************************************		
17. MISCELLANEOUS:							