	C FINANCING STATEMENT AMENDMEI LOW INSTRUCTIONS	N I		201501200000019480 1/2 \$ Shelby Cnty Judge of Pr	obate, AL
•	NAME & PHONE OF CONTACT AT FILER (optional) Pam Flynn 678-839-4428			01/20/2015 12:12:44 PM	FILED/CERT
	E-MAIL CONTACT AT FILER (optional)				
<u> </u>	pamela.flynn@myCSBonline.com				
C. S	SEND ACKNOWLEDGMENT TO: (Name and Address)	<del></del>			
	Community & Southern Bank				
	PO Box 280 Carrollton GA 30112				
	Carronton GA 30112				
L			<u> </u>	CE IS FOR FILING OFFICE USE	
	INITIAL FINANCING STATEMENT FILE NUMBER 1140401000092700		(or recorded) in the REAL	MENT AMENDMENT is to be filed [for ESTATE RECORDS dendum (Form UCC3Ad) <u>and</u> provide Deb	
2.	TERMINATION: Effectiveness of the Financing Statement identified at Statement	bove is terminated w	ith respect to the security intere	st(s) of Secured Party authorizing th	is Termination
3.	ASSIGNMENT (full or partial): Provide name of Assignee in item 7a o For partial assignment, complete items 7 and 9 and also indicate affecte			of Assignor in item 9	
4.	CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	above with respect	to the security interest(s) of Sec	ured Party authorizing this Continua	tion Statement is
5.	PARTY INFORMATION CHANGE:				
C		one of these three bo		ne: Complete item DELETE name	· Give record name
TI	his Change affects Debtor or Secured Party of record iter	n 6a or 6b; <u>and</u> item 7	iddress: Complete a or 7b <u>and</u> item 7c7a or 7b,	ne: Complete item DELETE name and item 7c to be deleted in	n item 6a or 6b
,	CURRENT RECORD INFORMATION: Complete for Party Information Cl 6a. ORGANIZATION'S NAME	nange - provide only	one name (6a or 6b)		
	ADAMS HOMES LLC. an Alabama limi	ted liability	company 3000 G	ulf Breeze Parkway	Gulf Breeze
OR	ADAMS HOMES LLC, an Alabama limi	ted liability		ulf Breeze Parkway  ADDITIONAL NAME(S)/INITIAL(S)	Gulf Breeze
OR		<del>_</del>		<del></del>	
		FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Infor	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. (	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Infor  7a. ORGANIZATION'S NAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. (	6b. INDIVIDUAL'S SURNAME CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Infor 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. (	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Infor  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	of the Debtor's name)
7. C	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Infor  7a. ORGANIZATION'S NAME  7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	of the Debtor's name)
7. C	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Informati	mation Change - provide	only one name (7a or 7b) (use exact, full name)	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE	SUFFIX SUFFIX COUNTRY
7. C	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Informati	FIRST PERSON	only one name (7a or 7b) (use exact, full name)	ame, do not omit, modify, or abbreviate any part	of the Debtor's name)  SUFFIX
7. C	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Info	mation Change - provide	only one name (7a or 7b) (use exact, full name)	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE	SUFFIX SUFFIX COUNTRY
7. C	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Info	mation Change - provide	only one name (7a or 7b) (use exact, full name)	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE	SUFFIX SUFFIX COUNTRY
7. C	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Info	mation Change - provide	only one name (7a or 7b) (use exact, full name)	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE	SUFFIX SUFFIX COUNTRY
7. C	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Info	mation Change - provide	only one name (7a or 7b) (use exact, full name)	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE	SUFFIX SUFFIX COUNTRY
7. C	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Info	mation Change - provide	only one name (7a or 7b) (use exact, full name)	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE	SUFFIX SUFFIX COUNTRY
7. C	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Info	CITY  CITY	DELETE collateral	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE  RESTATE covered collateral	SUFFIX  SUFFIX  COUNTRY  ASSIGN collateral
7c. 8.	6b. INDIVIDUAL'S SURNAME  CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information or Party Info	CITY  CITY	DELETE collateral  Delete collateral  rovide only one name (9a or 9b) (i	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE  RESTATE covered collateral	SUFFIX  SUFFIX  COUNTRY  ASSIGN collateral
7c. 8.	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information of Party Information Information of Party Information Information Information Information Information Information Information Information Inform	CITY  AMENDMENT: P	DELETE collateral  Delete collateral  rovide only one name (9a or 9b) (i	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE  RESTATE covered collateral	SUFFIX  SUFFIX  COUNTRY  ASSIGN collateral
7c.  7c.  9. N	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information of Party Information Information of Party Information Information Information Information Information Information Information Information Inform	CITY  AMENDMENT: P	DELETE collateral  DELETE collateral  rovide only one name (9a or 9b) (ing Debtor	ADDITIONAL NAME(S)/INITIAL(S)  ame, do not omit, modify, or abbreviate any part  STATE POSTAL CODE  RESTATE covered collateral	SUFFIX  SUFFIX  COUNTRY  ASSIGN collateral

10. OPTIONAL FILER REFERENCE DATA:

772133

	C FINANCING STATEMENT AMENI	DMENIAD	<b>—</b>	20150120000019480 2/2 \$ 00	
11.	11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 20140401000092700			Shelby Cnty Judge of Proba 01/20/2015 12:12:44 PM FIL	te, AL
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Sar	me as item 9 on Amendo	nent form		
	12a ORGANIZATION'S NAME	·			
OR	12b INDIVIDUAL'S SURNAME				
	FIRST PERSONAL NAME				
	ADDITIONAL NAME(\$)/INITIAL(\$)		SUFFIX	HE ABOVE SPACE IS FOR FILING OFFICE	USE ONLY
13.	Name of DEBTOR on related financing statement (Name of one Debtor name (13a or 13b) (use exact, full name; do not omit, m		rd required for indexing purp	oses only in some filing offices - see Instruction item	
	13a. ORGANIZATION'S NAME		· · ·	- " · · · · · · · · · · · · · · · · · ·	
OR	ADAMS HOMES LLC, an Alabam			3000 Gulf Breeze Parkway	
	13b. INDIVIDUAL'S SURNAME	FIRST	PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	This FINANCING STATEMENT AMENDMENT		17. Description of rea		

18. MISCELLANEOUS:

772133