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LICC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141					
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolte	erskluwer.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	23729 - WELLS FARGO				
CT Lien Solutions P.O. Box 29071	46561417	2015012800	00029380	1/2 \$ 00	
Glendale, CA 91209-9071	ALAL	Shelby Cn	y Judge d	of Probate, AL 3 PM FILED/CERT	
	FIXTURE			P FILED/CERT	
File with: Shelby, AL		THE ABOVE S	PACE IS FO	OR FILING OFFICE	USE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 200120883 5/23/2001 CC AL Shelby		1b. This FINANCING STA (or recorded) in the RI	TEMENT AM EAL ESTATE		ed [for record]
TERMINATION: Effectiveness of the Financing Statement Statement	identified above is terminated w		· · · · · · · · · · · · · · · · · · ·		
3. ASSIGNMENT (full or partial): Provide name of Assignee in For partial assignment, complete items 7 and 9 and also items 7.			f Assignor in	item 9	
4. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable	•	o the security interest(s) of Secu	red Party auti	horizing this Continuati	on Statement is
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes:	AND Check one of these three b CHANGE name and/or		name: Comple	ete item DELETE na	ame: Give record name
This Change affects Debtor or Secured Party of record	CHANGE name and/or item 6a or 6b; <u>and</u> item	<u> </u>	name: Comple 7b, <u>and</u> item 7	c to be delete	ed in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Info 6a. ORGANIZATION'S NAME	rmation Change - provide only <u>or</u>	ne name (6a or 6b)	··		
AUM PROPERTIES, LLC					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7 CHANCED OD ADDED INCODMATION: Control of the first					
7. CHANGED OR ADDED INFORMATION: Complete for Assignment of Ta. ORGANIZATION'S NAME	or Party Information Change - provide only	y <u>one</u> name (7a or 7b) (use exact, full na	me; ao not omit, i	modity, or abbreviate any par	or the Debtor's name)
7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME			- \7. "		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
- NATION ASSESSES				T	
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these fou	r boxes: ADD collateral	DELETE collateral	RESTATE	covered collateral	ASSIGN collateral
Indicate collateral:	DONOG		INCOINTE	covered conateral	ACCIOIT Conateral
9. NAME OF SECURED PARTY OF RECORD AUTHOR	IZING THIS AMENDMENT: F	Provide only <u>one</u> name (9a or 9b)	(name of Ass	signor, if this is an Assi	gnment)
If this is an Amendment authorized by a DEBTOR, check here	and provide name of authoriz	zing Debtor			
9a. ORGANIZATION'S NAME THE MONEY STORE COMMERCIAL MOR	RTGAGE, INC.				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSOI	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: A	UM PROPERTIES, LLC				

46561417

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

	LOW INSTRUCTIONS						
11. I	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a	on Amendment form					
	120883 5/23/2001 CC AL Shelby						
12.	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as iter 12a. ORGANIZATION'S NAME	m 9 on Amendment fo	rm				
•	THE MONEY STORE COMMERCIAL MORTGA	GE, INC.					
OR	12b. INDIVIDUAL'S SURNAME	7 , <u></u>		20150128000029380 2/2 \$.00			
	FIRST PERSONAL NAME		<u>. </u>	20150128000029380 2/2 \$.00	-		
		. <u> </u>	Toursey	20150128000029366 2,2 0.5 Shelby Cnty Judge of Probate, Al 01/28/2015 01:21:53 PM FILED/CE	RT		
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE US	F ONLY		
	Name of DEBTOR on related financing statement (Name of a current			purposes only in some filing offices - see Instruction item			
	one Debtor name (13a or 13b) (use exact, full name; do not omit, mo	dify, or abbreviate any	y part of the Debt	or's name); see Instructions if name does not fit			
	13a. ORGANIZATION'S NAME AUM PROPERTIES, LLC						
OR	13b. INDIVIDUAL'S SURNAME	FIRST PER	SONAL NAME	ADDITIONAL NAME(S)INITIAL(S)	SUFFIX		
Sec	ADDITIONAL SPACE FOR ITEM 8 (Collateral): tor Name and Address: A PROPERTIES, LLC - 232 Cahaba Valley Rd , PELHAI ured Party Name and Address: MONEY STORE COMMERCIAL MORTGAGE, INC I	P.O. BOX 162247	17. Descript	tion of real estate:			
(covers timber to be cut covers as-extracted collateral Name and address of a RECORD OWNER of real estate described in Debtor does not have a record interest): If Properties, LLC	is filed as a fixture find item 17	see exhib	oit "A"			