

UCC FINANCING STATEMENT AMENI	DMENT			
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)		0000054030		
B. SEIND ACKNOVICEDGINENT TO. (Name and Address)		Shelby Cnty Judge of Probate, AL 02/20/2015 11:02:44 AM FILED/CERT		
	02/20/2		,	
Alabama Power Company				
600 18th St N				
Birmingham, AL 35203				
	THE ABO	· · · · · · · · · · · · · · · · · · ·	OR FILING OFFICE L	
1a. INITIAL FINANCING STATEMENT FILE # 200911020004080	000		is FINANCING STATEM be filed [for record] (or re	
		RE	AL ESTATE RECORDS	· 
2. TERMINATION: Effectiveness of the Financing Statement identi				
3. CONTINUATION: Effectiveness of the Financing Statement id continued for the additional period provided by applicable law.	entified above with respect to security interest(s) of the S	Secured Party auth	orizing this Continuation	n Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7	a or 7b and address of assignee in item 7c; and also give r	name of assignor in	item 9.	
5. AMENDMENT (PARTY INFORMATION): This Amendment affe				
Also check one of the following three boxes and provide appropriate infe	tered terms	omy <u>ville</u> or mode	the conce.	
CHANGE name and/or address: Give current record name in item (	6a or 6b; also give new DELETE name: Give reco		DD name: Complete iten	n 7a or 7b, and also
name (if name change) in item 7a or 7b and/or new address (if address).  6. CURRENT RECORD INFORMATION:	ress change) in item 7c to be deleted in item 6a or	6b. Lite	em 7c; also complete iter	ns 7d-7g (if applicable).
6a. ORGANIZATION'S NAME				
OR 6b. INDIVIDUAL'S LAST NAME	S LAST NAME FIRST NAME		MIDDLE NAME SUFFIX	
Fitch	Christopher	$\mathbf{D}$		
7. CHANGED (NEW) OR ADDED INFORMATION:			. <u></u>	ı
7a. ORGANIZATION'S NAME				·
OR 75. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
Fitch	Stacey	C		
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1513 Amberly Woods Cir	Helena	AL	35080	US
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZ	ZATION 7f. JURISDICTION OF ORGANIZATION	7g. ORG	ANIZATIONAL ID #, if a	iny
ORGANIZATION DEBTOR I				NONE
8. AMENDMENT (COLLATERAL CHANGE): check only one box.				INONE
Describe collateral deleted or added, or give entire resta		inand		
Describe conateraldeleted ofadded, or give entireresta	ated collateral description, or describe collateral Lass	ignea.		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING	THIS AMENDMENT (name of assignor, if this is an As	signment). If this is	s an Amendment authoriz	zed by a Debtor which
adds collateral or adds the authorizing Debtor, or if this is a Termination	authorized by a Debtor, check here 🔲 and enter name o	of DEBTOR author	orizing this Amendment.	
9a. ORGANIZATION'S NAME			<del></del>	
Alabama Power Company				
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
10, OPTIONAL FILER REFERENCE DATA		<u> </u>		

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20091102000408000 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

20150220000054030 2/2 \$.00 Shelby Cnty Judge of Probate, AL 02/20/2015 11:02:44 AM FILED/CERT

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY