



Shelby Cnty Judge of Probate, AL 03/09/2015 02:32:43 PM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294				
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	· · · · · · · · · · · · · · · · · · ·			
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
96828430 - 358370				
Corporation Service Company				
801 Adlai Stevenson Drive				
Springfield, IL 62703	d In: Alabama			
	(Shelby)	THE ABOVE SPACE	CE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER				
20091228000470780 12/28/2009		(or recorded) in the REAL Filer: <u>attach</u> Amendment Add	IENT AMENDMENT is to be filed [for ESTATE RECORDS endum (Form UCC3Ad) and provide Debte	or's name in item 13
2. TERMINATION: Effectiveness of the Financing Statement identified a Statement	ibove is terminated v	with respect to the security interes	t(s) of Secured Party authorizing this	Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a of For partial assignment, complete items 7 and 9 and also indicate affects			f Assignor in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	d above with respect	to the security interest(s) of Secu	ared Party authorizing this Continuati	on Statement is
5. PARTY INFORMATION CHANGE:	. <u>.</u> .			
Check one of these two boxes: AND Check	one of these three bo		ou Occupated North DELETE come.	Cive second name
This Change affects Debtor or Secured Party of record ite	HANGE name and/or a em 6a or 6b; <u>and</u> item 7	address: Complete ADD nam 7a or 7b <u>and</u> item 7c 7a or 7b,	e: Complete item DELETE name: and item 7c to be deleted in	Give record name item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information C	hange - provide only	one name (6a or 6b)		
6a. ORGANIZATION'S NAMEMCCULLOUGH SNAPPY SE	RVICE OIL C	O INC.		
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info	rmation Change - provide	only one name (7a or 7b) (use exact, full na	me: do not omit, modify, or abbreviate any part of	of the Debtor's name)
7a. ORGANIZATION'S NAME				
7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME			· · · · · · · · · · · · · · · · · · ·	<u></u>
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		· · · · · · · · · · · · · · · · · · ·		SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
O COLLATERAL CHANCE: Also shook as a stable as a four house.	A DD colleteral	DELETE collateral R	ESTATE covered collateral	ASSIGN collateral
	ADD collateral		LOTATE COvered Consters	ASSIGN CONSTENS
Indicate collateral:				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and provided by a DEBTOR.			name of Assignor, if this is an Assignme	ent)
9a. ORGANIZATION'S NAME First Commercial a div Synov				
i ii st Sommitte dia dia Symov				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	}			