7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME OR	CC EINIA NICIR	JC CTATEM		MENT			
Reshia Hartman (205) 402-4005 B. SEND ACKNOWLEDGMENT TO: (Name and Address) InterFirst Capital, LLC 2700 Highway 280. Ste 315W Birmingham, AL 35223 THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 1a. INITIAL FINANCING STATEMENT FILE # 20151007000525130 THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 1b. This Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement continued for the additional period provided by applicable law. 2 TERMINATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Termination Statement continued for the additional period provided by applicable law. 4 ASSIGNMENT (full or partial): Give name of assignee in item 7 ao 77 b and address of assignee in item 7c; and also give name of assignor in item 9. Assignment (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only or of the set wo boxes. Also check ora of the following three boxes and provide appropriate information in lems 8 and/or 7. CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name of mame for mame through in lam? 7ao 7a band or 8b; also give new name of mame for and point may not on a man of the man of them 7ao 7a band or new address change) in item 7ao 7b and soft on several name in them 6a or 6b. CURRENT RECORD INFORMATION: Secured Party of record. Check only or of the set wo boxes.							
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InterFirst Capital, LLC 2700 Highway 280, Ste 315W Birmingham, AL 35223 THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 3/13/2015 12:31:48 PM FILED/CERT THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 20051007000525130 THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 2013/13/2015 12:31:48 PM FILED/CERT THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 20051007000525130 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement on the additional period provided by applicable law. AL ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9. 5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or St. also check gng of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 6a or 6b; also give name (in game change) in item 7a or 7b and/of new address (if address change) in item 7c. Go. CURRENT RECORD INFORMATION: Go. CURRENT RECORD INFORMATION: Go. CURRENT RECORD INFORMATION: Go. CORGANIZATION'S NAME Restore Properties, LLC Go. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME MIDDLE NAME S OX CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·		<u></u>			
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Birmingham, AL 35223 ### ABOVE SPACE IS FOR FILING OFFICE USE ONL Shelby Cnty Judge of Probate, AL 03/13/2015 12:31:48 PM FILED/CERT THE ABOVE SPACE IS FOR FILING OFFICE USE ONL 1a. INITIAL FINANCING STATEMENT FILE # 20051007000525130 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement on the additional period provided by applicable law. #### ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c: and also give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c: and also give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 7c: and also give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor in item 9. #### AMSIGNMENT (full or partial): Give name of assignor		A '					
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c. MAILING ADDRESS STATE POSTAL CODE C	c. MAILING ADDRESS			CITY		STATE POSTAL CODE	COUNTRY
245 Cahaba Valley Pkwy, Ste 200 Pelham Al 35124	45 Cahaba Valley Pkwy, Ste 200			Pelham		A1 35124	USA
ADD'L INFO RE 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any ORGANIZATION				TION 7f. JURISDICTIO	ON OF ORGANIZATION	7g. ORGANIZATIONAL ID #	, if any
DEBTOR LLC Alabama				Alabama			NO