B. E-MAIL CONTACT AT FILER (optional)  C. SEND ACKNOWLEDGMENT TO: (Name and Address)  Green Tree Servicing LLC				
Green Tree Servicing LLC				
Green Tree Servicing LLC 7360 South Kyrene Rd		20150323000091440 1/1 \$.00 Shelby Cnty Judge of Probate, AL		
Tempe, AZ 85283		03/23/	2015 03:25:33 PM FILED/CER	T
		THE ADOME		
a. INITIAL FINANCING STATEMENT FILE NUMBER [nst # 1994-22021 Filing Dt 07/13/1994		1b. This FINANCING S	SPACE IS FOR FILING OFFICE US FATEMENT AMENDMENT is to be filed [ REAL ESTATE RECORDS	
TERMINATION: Effectiveness of the Financing Statement ide	entified above is terminated	Filer: attach Amendme	ent Addendum (Form UCC3Ad) and provide De	
Statement	· · · · · · · · · · · · · · · · · · ·		······································	
ASSIGNMENT (full or partial): Provide name of Assignee in in For partial assignment, complete items 7 and 9 and also indicated	te affected collateral in item	8		
. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law	identified above with respec	t to the security interest(s) o	of Secured Party authorizing this Continu	ation Statement is
Check one of these two boxes:  This Change affects Debtor or Secured Party of record  CURRENT RECORD INFORMATION: Complete for Party Inform  6a. ORGANIZATION'S NAME	D Check one of these three be CHANGE name and/or item 6a or 6b; and item mation Change - provide only	address: Complete AD 7a or 7b <u>and</u> item 7c 7a		e: Give record nar in item 6a or 6b
6b. INDIVIDUAL'S SURNAME  WYNN	FIRST PERSON		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or 7a. ORGANIZATION'S NAME	r Party Information Change - provide	only <u>one</u> name (7a or 7b) (use exact	, full name; do not omit, modify, or abbreviate any pa	rt of the Debtor's name
R 7b. INDIVIDUAL'S SURNAME			<u> </u>	
INDIVIDUAL'S FIRST PERSONAL NAME		·	<del></del>	
INIDIVIDUAL'S ADDITIONAL MANAGES (SVINUTIAL (S)			<u> </u>	, <u>-</u>
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
				i