| | | y von parameters | |
|--|--|---|-------------------|
| | | · · · · · · · · · · · · · · · · · · · | |
| UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS | | | |
| A. NAME & PHONE OF CONTACT AT FILER (optional) | | | |
| B. E-MAIL CONTACT AT FILER (optional) | | | |
| collections@microf.com | | | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | |
| MICROF LLC | | | |
| PO BOX 70085 ALBANY GA 31708 | Ch | 150423000132460 1/3 \$51.90 elby Cnty Judge of Probate, AL | • - |
| , ALDANI GA 31700 | Ø4 | /23/2015 02:47:48 PM FILED/CER | 1 |
| | | A DOVE SDACE IS FOR FILING OFFICE | UCE ONLY |
| 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (us | | any part of the Debtor's name); if any part of the Is | |
| name will not fit in line 1b, leave all of item 1 blank, check here 1a. ORGANIZATION'S NAME | and provide the Individual Debtor information in ite | | |
| OR 1b. INDIVIDUAL'S SURNAME | TELECT DEDOCALAL MARKE | TADDITIONAL ALABACIONALITIAL | /O |
| Owens | FIRST PERSONAL NAME Timothy | ADDITIONAL NAME(S)/INITIAL | (S) SUFFIX |
| 1c. MAILING ADDRESS 1098 Wyndham Ln | Helena | STATE POSTAL CODE AL 35080 | COUNTRY |
| 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (us | | | |
| OR 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL | (S) SUFFIX |
| 2c. MAILING ADDRESS | CITY | STATE POSTAL CODE AL | COUNTRY |
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSI | IGNOR SECURED PARTY): Provide only one Secure | ed Party name (3a or 3b) | |
| 3a. ORGANIZATION'S NAME MICROF LLC | | | |
| 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL | (S) SUFFIX |
| | | | |
| PO BOX 70085 | Albany | GA 31708 | COUNTRY |
| 4. COLLATERAL: This financing statement covers the following colla All of the Debtor's right, title and interest subject to that certain Lease No. RTO-18315 | t, now existing and hereafter a between Debtor as Less | see and Microf, LLC as Less | or, (ii) all |
| insurance, warranty, rental and other cla | | | |
| Equipment, (iii) all books, records and provided the Locaca may be at become | | | • |
| which the Lessee may be or become ent | | | |
| of this financing statement, "Equipment' and includes all substitutions, replacement | | | • |
| accessions thereto. THIS FILING IS FOR | | · • | |
| PARTIES CONSIDER THIS TRANSACTIO | | | |
| PLEDGE THE EQUIPMENT, IT IS OWNED | | | |
| 5. Check only if applicable and check only one box: Collateral is | hold in a Trust (see LICC1Ad, item 17 and Instructions | hoing administered by a Decedent's De | |
| a. Check only if applicable and check only one box: | iola in a musi (see occurru, item manu instructions | being administered by a Decedent's Pe 6b. Check <u>only</u> if applicable and check_ | |
| Public-Finance Transaction Manufactured-Home Tra | ansaction A Debtor is a Transmitting Utili | | 1-UCC Filing |
| 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lesson | r Consignee/Consignor Se | eller/Buyer Bailee/Bailor | Licensee/Licensor |
| he total cost of the lease is \$ 12569.66 | | | |
| | | | |

UCC FINANCING STATEMENT ADDENDUM **FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Owens Shelby Cnty Judge of Probate, AL 04/23/2015 02:47:48 PM FILED/CERT FIRST PERSONAL NAME Timothy SUFFIX ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX COUNTRY 10c. MAILING ADDRESS POSTAL CODE CITY STATE USA AL ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 2014 BRYANT Heat Strips M# FB4-5-1 S# 249131-007-005 2014 BRYANT Heat Pump Condenser M# 213CNA030000 S# 4714E14013 2014 BRYANT Air Handler M# FB4CNF030L00 S# 0715A72781 This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) is filed as a fixture filing covers timber to be cut covers as-extracted collateral 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): See attached Exhibit.

International Association of Commercial Administrators (IACA)

17. MISCELLANEOUS:

LOT 246, ACCORDING TO THE SURVEY OF WYNDHAM - WILKERSON, PHASE 5 AND RESURVEY OF LOT 267 OF WYNDHAM - WILKERSON SECTOR, PHASE III, AS RECORDED IN MAP BOOK 24, PAGE 128. IN THE PROBATE OFFICE OF SHELBY COUNTY, ALABAMA.

