FOLLOW INSTRUCTIONS	STATEMENTAMEND	IAITIAI			
	S (front and back) CAREFULLY ONTACT AT FILER [optional]				
Tonya Tarbert 226.1			201504290001	38900 1/2 \$.00	
B. SEND ACKNOWLEDG	MENT TO: (Name and Address)	· · · · · · · · · · · · · · · · · · ·	Shelhy Chty	Judge of Probate, Hi	L RT
			04/29/2015 0	9:26:31 AM FILED/CE	
Alabama Pow	er Company	<b>\$</b>			
600 18th St N	- ·				
Birmingham,	AL 35203				
			THE ABOVE SPA	CE IS FOR FILING OFFICE	USE ONLY
a. INITIAL FINANCING STAT	TEMENT FILE # 2007072500034745	50		1b. This FINANCING STATE to be filed [for record] (or REAL ESTATE RECORD	r recorded) in the
. X TERMINATION: Eff	ectiveness of the Financing Statement identification	ed above is terminated with respect to	security interest(s) of the Se	ecured Party authorizing this Ter	mination Statement.
	Effectiveness of the Financing Statement ide	ntified above with respect to security	interest(s) of the Secured F	Party authorizing this Continuati	ion Statement is
continued for the additi	ional period provided by applicable law.				
ASSIGNMENT (full o	or partial): Give name of assignee in item 7a	or 7b and address of assignee in item	7c; and also give name of a	ssignor in item 9.	· · · · · · · · · · · · · · · · · · ·
	INFORMATION): This Amendment affect		of record. Check only one	of these two boxes.	
	ving three boxes <u>and</u> provide appropriate infor address: Give current record name in item 6a		E name: Give record name	ADD name: Complete it	tem 7a or 7b, and also
name (if name change)	in item 7a or 7b and/or new address (if addre	ess change) in item 7cto be de	leted in item 6a or 6b.	item 7c; also complete it	tems 7d-7g (if applicabl
. CURRENT RECORD INF 6a. ORGANIZATION'S N	· · · · · · · · · · · · · · · · · · ·		<del></del>	······································	
6b. INDIVIDUAL'S LAST	NAME	FIRST NAME		MIDDLE NAME	SUFFIX
Billingsley		Sharon			
7a. ORGANIZATION'S N				· · · · · · · · · · · · · · · · · · ·	
•					
7b. INDIVIDUAL'S LAST	NAME	FIRST NAME		MIDDLE NAME	SUFFIX
76. INDIVIDUAL'S LAST	NAME				
c. MAILING ADDRESS		CITY		STATE POSTAL CODE	COUNTRY
c. MAILING ADDRESS 102 Meadowgreen		CITY  Montevallo	RGANIZATION		COUNTRY
c. MAILING ADDRESS 102 Meadowgreen	Dr.  ADD'L INFO RE   7e. TYPE OF ORGANIZATION	CITY  Montevallo	RGANIZATION	STATE POSTAL CODE  AL 35115	COUNTRY US
c. MAILING ADDRESS  102 Meadowgreen d. TAX ID #: SSN OR EIN	Dr.  ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR	CITY  Montevallo	RGANIZATION	STATE POSTAL CODE  AL 35115	COUNTRY
c. MAILING ADDRESS  102 Meadowgreen d. TAX ID #: SSN OR EIN	Dr.  ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR   TERAL CHANGE): check only one box.	Montevallo ATION 7f. JURISDICTION OF O		STATE POSTAL CODE  AL 35115	COUNTRY US
c. MAILING ADDRESS  102 Meadowgreen d. TAX ID #: SSN OR EIN	Dr.  ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR	Montevallo ATION 7f. JURISDICTION OF O		STATE POSTAL CODE  AL 35115	COUNTRY US
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c. MAILING ADDRESS 102 Meadowgreen d. TAX ID #: SSN OR EIN  B. AMENDMENT (COLLA Describe collateral dele  dele  NAME OF SECURED	ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR   TERAL CHANGE): check only one box. eted or added, or give entire restated.	CITY Montevallo  ATION 7f. JURISDICTION OF O  ed collateral description, or describe  THIS AMENDMENT (name of assignment)	collateral assigned.	STATE POSTAL CODE AL 35115  7g. ORGANIZATIONAL ID #, if	country US fany Not
c. MAILING ADDRESS 102 Meadowgreen d. TAX ID #: SSN OR EIN  AMENDMENT (COLLA Describe collateral dele  NAME OF SECURED	ADD'L INFO RE   7e. TYPE OF ORGANIZATION   DEBTOR    ATERAL CHANGE): check only one box. eted or   added, or give entire   restate    PARTY OF RECORD AUTHORIZING authorizing Debtor, or if this is a Termination and the second s	CITY Montevallo  ATION 7f. JURISDICTION OF O  ed collateral description, or describe  THIS AMENDMENT (name of assignment)	collateral assigned.	STATE POSTAL CODE AL 35115  7g. ORGANIZATIONAL ID #, if	country US fany Not
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## UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20070725000347450

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME

Alabama Power Company

12b. INDIVIDUAL'S LAST NAME FIRST NAME

Sharon

Billingsley 13. Use this space for additional information



Shelby Cnty Judge of Probate, AL 04/29/2015 09:26:31 AM FILED/CERT

MIDDLE NAME, SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY