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	

20150611000195260 1/2 \$51.25	
Shelby Cnty Judge of Probate,	AL

06/11/2015 10:17:21 AM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) name will not fit in line 1b, leave all of item 1 blank, check here 1a. ORGANIZATION'S NAME 1b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME Jeffrey Stephenson POSTAL CODE COUNTRY 1c. MAILING ADDRESS STATE CITY 35124 **USA** Pelham 127 Heather Ln 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) name will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME Stephenson Jamie COUNTRY POSTAL CODE 2c. MAILING ADDRESS CITY STATE 35124 USA Pelham 127 Heather Lane 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b) 3a. ORGANIZATION'S NAME MICROF LLC FIRST PERSONAL NAME SUFFIX ADDITIONAL NAME(S)/INITIAL(S) 3b. INDIVIDUAL'S SURNAME POSTAL CODE COUNTRY STATE CITY 3c. MAILING ADDRESS USA **Albany** 31708 GA PO BOX 70085

All of the Debtor's right, title and interest, now existing and hereafter arising, in and to all of the Equipment subject to that certain Lease No. RTO-21438 between Debtor as Lessee and Microf, LLC as Lessor, (ii) all insurance, warranty, rental and other claims and rights to payment and chattel paper arising out of such Equipment, (iii) all books, records and proceeds relating to the foregoing, and (iv) any other property or rights to which the Lessee may be or become entitled by reason of Lessee's interest in the Equipment. For the purposes of this financing statement, "Equipment" shall be further described in item 16 of the UCC1Ad attached hereto, and includes all substitutions, replacements, upgrades, repairs, parts and attachments, improvements and accessions thereto. THIS FILING IS FOR PRECAUTIONARY AND INFORMATIONAL PURPOSES ONLY. THE PARTIES CONSIDER THIS TRANSACTION TO BE A TRUE LEASE. LESSEE HAS NO RIGHT TO SELL OR PLEDGE THE EQUIPMENT, IT IS OWNED BY LESSOR AND LEASED TO LESSEE.

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative
6a. Check only if applicable and check only one box:	
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/E	uyer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: The total cost of the lease is \$ 13461.34 .	

4. COLLATERAL: This financing statement covers the following collateral:

Shelby Cnty Judge of Probate, AL UCC FINANCING STATEMENT ADDENDUM 06/11/2015 10:17:21 AM FILED/CERT **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 Stephenson FIRST PERSONAL NAME Jeffrey ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 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 STATE CITY USA AL ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX COUNTRY 11c. MAILING ADDRESS CITY STATE POSTAL CODE 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 2015 BRYANT Heat Pump Condenser M# 214DNA042000BAAA S# 1815E01447 2015 BRYANT Evaporator Coil M# CAPMP4221ALAAAAA S# 1115X09865 2015 BRYANT Furnace M# 310AAV048090AGJA S# 1615A21677 14. This FINANCING STATEMENT: This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 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): STONEHAVEN RIDGE AT PHASE 2 LOT 226 MAP BOOK: 28 PAGE: 146 INSTRUMENT 20020903000420170 Shelby County Alabama

17. MISCELLANEOUS: