NAME & PHONE OF CONTACT AT FILER (optional) CINDY THOMAS 205-326-8299				
E-MAIL CONTACT AT FILER (optional)  cindy.thomas@alagasco.com  SEND ACKNOWLEDGMENT TO: (Name and Addre	ss)	20150615000198760 20150615000198760 Shelby Cnty Judge 06/15/2015 10:57	e of Probate, AL 27 AM FILED/CERT	
ALABAMA GAS CORPORATI 2101 6TH AVE NORTH BIRMINGHAM, AL 35203	ION	THE ABOVE SPACE IS FO		
DEBTOR'S NAME: Provide only one Debtor name (1a or name will not fit in line 1b, leave all of item 1 blank, check here	<u> </u>	abbreviate any part of the Debto	or's name); if any part of the Ir	ndividual De
1a. ORGANIZATION'S NAME  1b. INDIVIDUAL'S SURNAME  CROWDER	FIRST PERSONAL NAME  BARBARA		ADDITIONAL NAME(S)/INITIAL(S) <b>B</b>	
MAILING ADDRESS 10 WILLOW OAK DR	CITY BIRMINGHA	STATE	POSTAL CODE 35244-1630	COUNT
SECURED PARTY'S NAME (or NAME of ASSIGNEE		ne Secured Party name (3a or 3	b)	
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS 2101 6TH AVE NORTH	BIRMINGHA	M STATE AL	35203	COUNT
TRANE GAS FURNACE M# TUD1B080A9361A S# 14034WBD1G				

## 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 Shelby Cnty Judge of Probate, AL 9b. INDIVIDUAL'S SURNAME 06/15/2015 10:57:27 AM FILED/CERT **CROWDER** FIRST PERSONAL NAME **BARBARA** SUFFIX ADDITIONAL NAME(S)/INITIAL(S) B 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 SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) COUNTRY POSTAL CODE STATE CITY 10c. MAILING ADDRESS ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME **GUIN SERVICES** SUFFIX ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME 11b. INDIVIDUAL'S SURNAME COUNTRY POSTAL CODE STATE 11c. MAILING ADDRESS US 35212 **BIRMINGHAM** AL 10 55TH ST S 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. 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 as-extracted collateral covers timber to be cut 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): 810 WILLOW OAK DR BIRMINGHAM, AL 35244-1630 LEGAL DESCRIPTION LOT 9 RIVERCHASE COUNTY CLUB 6TH ADD MAP BOOK 7 MAP PAGE 93 SHELBY COUNTY, ALABAMA 17. MISCELLANEOUS: