


UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]  
Jason Gilmore - (205) 874-7950

B. SEND ACKNOWLEDGMENT TO: (Name and Address)  

Gordon, Dana & Gilmore, LLC  
600 University Park Place  
Suite 100  
Birmingham, AL 3529

  
20150901000305410 1/1 \$.00  
Shelby Cnty Judge of Probate, AL  
09/01/2015 12:51:58 PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE #  
20110216000053890

1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.  
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2. ☒ TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.

3. ☐ CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.

4. ☐ ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.

5. AMENDMENT (PARTY INFORMATION): This Amendment affects ☐ Debtor or ☐ Secured Party of record. Check only one of these two boxes.  
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7.  
☐ CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. ☐ DELETE name: Give record name to be deleted in item 6a or 6b. ☐ ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).

6. CURRENT RECORD INFORMATION:  
6a. ORGANIZATION'S NAME  
Chesser Reserve, LLC

OR  
6b. INDIVIDUAL'S LAST NAMEFIRST NAMEMIDDLE NAMESUFFIX

7. CHANGED (NEW) OR ADDED INFORMATION:  
7a. ORGANIZATION'S NAME

OR  
7b. INDIVIDUAL'S LAST NAMEFIRST NAMEMIDDLE NAMESUFFIX

7c. MAILING ADDRESSCITYSTATEPOSTAL CODECOUNTRY

7d. TAX ID #: SSN OR EINADD'L INFO RE ORGANIZATION DEBTOR7e. TYPE OF ORGANIZATION7f. JURISDICTION OF ORGANIZATION7g. ORGANIZATIONAL ID #, if any  
Do Not Provide  
☐ NONE

8. AMENDMENT (COLLATERAL CHANGE): check only one box.  
Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned.

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of DEBTOR authorizing this Amendment.

9a. ORGANIZATION'S NAME

OR  
9b. INDIVIDUAL'S LAST NAMEFIRST NAMEMIDDLE NAMESUFFIX

10. OPTIONAL FILER REFERENCE DATA