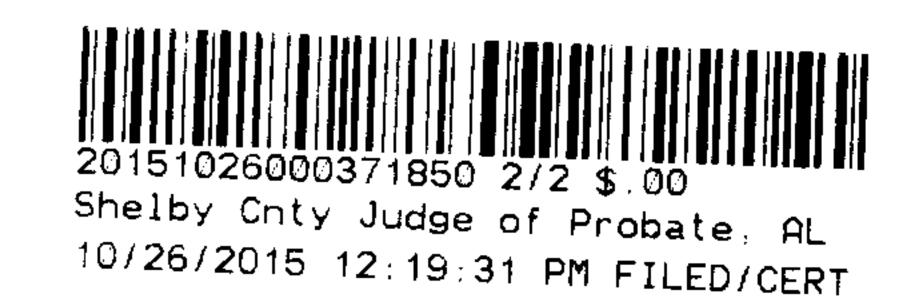




Shelby Chty Judge of Probate, AL 10/26/2015 12:19:31 PM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS		_		
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5	294			
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
106954901 - 365000				
Corporation Service Company	•			
801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Alabama			
	(Shelby)			
			SPACE IS FOR FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20130614000244310 06/14/2013		This FINANCING ST (or recorded) in the i Filer: <u>attach</u> Amendme	ATEMENT AMENDMENT is to be filed [for REAL ESTATE RECORDS ant Addendum (Form UCC3Ad) and provide Debt	recoraj or's name in item 13
2. TERMINATION: Effectiveness of the Financing Statement ident Statement	ified above is terminated v	vith respect to the security in	nterest(s) of Secured Party authorizing this	Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in iter For partial assignment, complete items 7 and 9 and also indicate a	m 7a or 7b, <u>and</u> address o affected collateral in item i	f Assignee in item 7c <u>and</u> na	ame of Assignor in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law	entified above with respect	to the security interest(s) o	f Secured Party authorizing this Continuati	on Statement is
5. PARTY INFORMATION CHANGE:		<u> </u>		
Check one of these two boxes.	Check <u>one</u> of these three b —— CHANGE name and/or a		Diname: Complete item DELETE name:	Give record name
This Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; and item		D name: Complete item DELETE name: or 7b, <u>and</u> item 7c to be deleted in	item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information of Complete	tion Change - provide only	one name (ba or bb)		
OR 6b. INDIVIDUAL'S SURNAME CARTER	FIRST PERSON	IAL NAME	ADDITIONAL NAME(S)/INITIAL(S) D	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Pa	arty Information Change - provide	only <u>one</u> name (7a or 7b) (use exact	, full name; do not omit, modify, or abbreviate any part o	of the Debtor's name)
7a. ORGANIZATION'S NAME		<u> </u>	<u> </u>	
OR 7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME		<u> </u>		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral
Indicate collateral: Water Treatment System				
trator troudiniont by the state of the state				
INDEBTEDNESS: \$3085.88				
TAX: \$4.63				
	· · · · · · · · · · · · · · · · · · ·			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and			9b) (name of Assignor, if this is an Assignm	ent)
9a. ORGANIZATION'S NAME Agua Finance, Inc.	a provide traine or additional			·-·
9b. INDIVIDUAL'S SURNAME	FIRST PERSOI	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: CARTER	R, BRIAN D-:CXS	X401121313	<u> </u>	400054004
	.,	- - -		106954901



	ITIAL FINANCING STATEMENT FILE NUMBER: Sam 130614000244310 06/14/2013	ne as item 1a on Amendment fo	m			
_	AME OF PARTY AUTHORIZING THIS AMENDMENT:	Same as item 9 on Amendmer	nt form			
- 1	2a. ORGANIZATION'S NAME Aqua Finance, Inc.					
R 1	2b. INDIVIDUAL'S SURNAME					
	FIRST PERSONAL NAME					
-	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	THE ABOVE SPACE IS FO	OR FILING OFFICE	USE ONLY
3. N	ame of DEBTOR on related financing statement (Name ne Debtor name (13a or 13b) (use exact, full name; do not omi	e of a current Debtor of record it, modify, or abbreviate any pa	required for indexing of the Debtor's name	ourposes only in some filing office e); see Instructions if name does	es - see Instruction item s not fit	13): Provide
	3a. ORGANIZATION'S NAME					
R -	13b. INDIVIDUAL'S SURNAME	FIRST PER	CONAL NAME			
. A	DDITIONAL SPACE FOR ITEM 8 (Collateral):		CONAL NAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX
4. A	DDITIONAL SPACE FOR ITEM 8 (Collateral):		CSOIVAL INAME	ADDITIONAL	NAME(S)/INITIAL(S)	SUFFIX
5. Ti	DDITIONAL SPACE FOR ITEM 8 (Collateral): nis FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of a RECORD OWNER of real estate description of the collater ame and address of the collate		17. Description of APN: 34-3			SUFFIX