ICC FINANCING STATEMENT AMEND	MENI	•	N1 2 1 1	1000020024	· •
OLLOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional)				1800039826	_
Vanessa A. Orta 405-236-0003				2015 09:12:4	S AIVI
B. E-MAIL CONTACT AT FILER (optional)			CC4	1/2	
SEND ACKNOWLEDGMENT TO: (Name and Address)					
Anderson, McCoy & Orta PC					
100 North Broadway, Suite 2600 Oklahoma City, OK 73102					
Ckianoma City, OK 75102	•				
			_	R FILING OFFICE US	
a. INITIAL FINANCING STATEMENT FILE NUMBER		b. This FINANCING STATES (or recorded) in the REAL	. ESTATE F	ECORDS	
20130822000343800 filed 8/22/13 TERMINATION: Effectiveness of the Financing Statement Ide	-titled above is terminated w	Filer: <u>attach</u> Amendment Add			
TERMINATION: Effectiveness of the Financing Statement Ide Statement	Dillied above is tellilliared w	in respect to the accounty with a	o.(o, =, +==		
ASSIGNMENT (full) or partial): Provide name of Assignee in It For partial assignment, complete items 7 and 9 and also indicate	tem 7a or 7b, <u>and</u> address of e effected collateral in Item 6	Assignee in item 7c <u>and</u> name o	of Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement is continued for the additional period provided by applicable law	identified above with respect	to the security interest(s) of Sec	cured Party	authorizing this Continu	ation Statement is
PARTY INFORMATION CHANGE:					
Check <u>one</u> of these two boxes:	Check <u>one</u> of these three bo ےے CHANGE name and/or ع	iddress: Complete —, ADD nar	ne: Compl <u>e</u>	te itemDELETE nam	e: Give record nam
This Change affects Debtor or Secured Party of record	item 6a or 6b; <u>and</u> item 7	a or 7b <u>and</u> item 7c7a or /b	, <u>and</u> item 70	to be deleted	in ilem 6a or 6b
62. ORGANIZATION'S NAME	riation Change - provide only	<u>one (or or or)</u>			
			LADDITIO	VAL NAME(S)/INITIAL(S)	SUFFIX
6b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAT NAME			
7. CHANGED OR ADDED INFORMATION: Complete for Assignment of	r Party Information Change - provide	only <u>one</u> name (7a or 7b) (use exact, full n	ame; do not or	nit, modify, or abbreviate any pa	art of the Debtor's name)
7a. ORGANIZATION'S NAME					
DEUTSCHE BANK TRUST COMPANY AN TELEPROPERTY TO INDIVIDUAL'S SURNAME	VIERICAS, AS TRU		-		
TO. INDIVIDUALS SURIVAME					
INDIVIDUAL'S FIRST PERSONAL NAME					•
				<u> </u>	SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					
				TROOTE CORE	
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
7c. MAILING ADDRESS 1761 East St. Andrew Place	Santa An	a	CA	92705	COUNTRY
	Santa An		CA		USA
1761 East St. Andrew Place B. COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral:	Santa An	DELETE collateral	CA	92705 covered collateral	USA ASSIGN collater
1761 East St. Andrew Piace B. COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral: * FOR THE REGISTERED HOLDERS OF BA	Santa Ans: ADD collateral	DELETE collateral	CA	92705 covered collateral	USA ASSIGN collater
1761 East St. Andrew Place B. COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral:	Santa Ans: ADD collateral	DELETE collateral	CA	92705 covered collateral	USA ASSIGN collater
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1761 East St. Andrew Place B. COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral: * FOR THE REGISTERED HOLDERS OF BA MORTGAGE PASS-THROUGH CERTIFICAT	Santa Ans And Collateral And Collateral And Collateral Andrews Commercial Services (1984) Andrews Commercial Andrews (1984) An	DELETE collateral RCIAL MORTGAGE -KJ02	RESTATE	92705 Experied collateral RITIES, LLC, MU	ASSIGN collater
1761 East St. Andrew Place B. COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral: * FOR THE REGISTERED HOLDERS OF BAMORTGAGE PASS-THROUGH CERTIFICAT 9. NAME OF SECURED PARTY OF RECORD AUTHORIZII If this is an Amendment authorized by a DEBTOR, check here	Santa Ans And Collateral And Collateral And Collateral Andrews Commercial Services (1984) Andrews Commercial Andrews (1984) An	DELETE collateral RCIAL MORTGAGE -KJ02 Provide only one name (9a or 9b)	RESTATE	92705 Experied collateral RITIES, LLC, MU	ASSIGN collater
1761 East St. Andrew Place B. COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral: * FOR THE REGISTERED HOLDERS OF BAMORTGAGE PASS-THROUGH CERTIFICAT 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING IT this is an Amendment authorized by a DEBTOR, check here 9a. ORGANIZATION'S NAME	Santa Ans. SET ADD collateral ARCLAYS COMMETES, SERIES 2015 NG THIS AMENDMENT: and provide name of authorizations.	DELETE collateral RCIAL MORTGAGE -KJ02 Provide only one name (9a or 9b)	RESTATE	92705 Experied collateral RITIES, LLC, MU	ASSIGN collater
1761 East St. Andrew Place B. COLLATERAL CHANGE: Also check one of these four boxes Indicate collateral: * FOR THE REGISTERED HOLDERS OF BAMORTGAGE PASS-THROUGH CERTIFICAT 9. NAME OF SECURED PARTY OF RECORD AUTHORIZII If this is an Amendment authorized by a DEBTOR, check here	Santa Ans. SET ADD collateral ARCLAYS COMMETES, SERIES 2015 NG THIS AMENDMENT: and provide name of authorizations.	RCIAL MORTGAGE -KJ02 Provide only one name (9a or 9b) ing Debtor	CA RESTATE (name of As	92705 Experied collateral RITIES, LLC, MU	ASSIGN collater JLTIFAMILY nment)

20151118000398260 11/18/2015 09:12:43 AM UCC4 2/2

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 20130822000343800 filed 8/22/13				
NAME OF PARTY AUTHORIZING THIS AMENDM	ENT: Same as item 9 on Amend	ment form		
12a. ORGANIZATION'S NAME FEDERAL HOME LOAN MORTGA	GE CORPORATION		•	
12b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME	<u> </u>			
ADDITIONAL NAME(S)//NITIAL(S)		SUFFIX	TUE ADOVE SDACE IS EOD EII ING OFFICE I	IISE ONI V
3. Name of DEBTOR on related financing statement one Debtor name (13a or 13b) (use exact, full name; do n	(Name of a current Deblor of reco	ord required for indexing part of the Deblor's n	THE ABOVE SPACE IS FOR FILING OFFICE of purposes only in some filing offices - see Instruction item ame); see Instructions if name does not fit	
13a, ORGANIZATION'S NAME		, part or the Bobier 2 /		
SUMMERCHASE APARTMENTS, 136. INDIVIDUAL'S SURNAME		PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
AH INI	Filed and Recorded Official Public Record Judge James W. Fuhr County Clerk Shelby County, AL 11/18/2015 09:12:43 A \$31.00 DEBBIE 20151118000398260	meister, Probate J	idge,	
JEAH MAN	Official Public Record Judge James W. Fuhr County Clerk Shelby County, AL 11/18/2015 09:12:43 A \$31.00 DEBBIE	meister, Probate J	idge,	
AHAM!	Official Public Record Judge James W. Fuhr County Clerk Shelby County, AL 11/18/2015 09:12:43 A \$31.00 DEBBIE	meister, Probate J	Jung of the second of the seco	
5. This FINANCING STATEMENT AMENDMENT: rovers timber to be cut covers as-extracted of the covers and address of a RECORD OWNER of real estate (if Debtor does not have a record interest):	Judge James W. Fuhr County Clerk Shelby County, AL 11/18/2015 09:12:43 A \$31.00 DEBBIE 20151118000398260	MAM 17. Description	n of real estate: Address: 100 Summerchase Drive,	Hoover, A
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18. MISCELLANEOUS: