		9	Λħ τ~	
JCC FINANCING STATEMENT AMENDMEN OLLOW INSTRUCTIONS (front and back) CAREFULLY		ORIGINAL		
A. NAME & PHONE OF CONTACT AT FILER [optional]				
Kaylon Mikula 205-226-1402 B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
Alabama Power Company	2016010400000 Sholbu 0			
600 18th St N	2016010400000 Shelby Coty	02330 173		
Birmingham, AL 35203	■ SHEIDY Chtu	1	4 .00	
	01/04/2016 02	oz : is pm	FILED/CERT	
a. INITIAL FINANCING STATEMENT FILE #	THE ABOVE S		S FINANCING STATES	USE ONLY MENT AMENDMENT is
20101029000362650		☐ to t	be filed [fdr record] (or AL ESTATE RECORD	recorded) in the
2. X TERMINATION: Effectiveness of the Financing Statement identified above is	s terminated with respect to security interest(s) of t			
3. CONTINUATION: Effectiveness of the Financing Statement identified abortional continued for the additional period provided by applicable law.	ve with respect to security interest(s) of the Secu	red Party auth	orizing this Continuation	on Statement is
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and a	address of assignee in item 7c; and also give name	e of assignor in	item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment affects Del				
Also check one of the following three boxes and provide appropriate information in it			DD mama, Camplata ita	om 7a ar 7h, and alaa
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	o give new DELETE name: Give record n) in item 7c. to be deleted in item 6a or 6b.	ite	DD name: Complete ite em 7c; also complete ite	ems 7d-7g (if applicable)
6a. ORGANIZATION'S NAME	<u> </u>		i	<u></u>
			<u>.</u>	
6b. INDIVIDUAL'S LAST NAME MCBRIDE	FIRST NAME	MIDDLE	NAME	SUFFIX
	CHAD	F		
7. CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME		····		·····
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
MCBRIDE	LAURA	, , , ,	. 147317166	
c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
1151 AMBERLY WOODS	HELENA	AL	35080	US
d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORG	SANIZATIONAL ID #, if	any
DEBTOR				NONE
 AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collater 	ral description, or describe collateral assign	ed.	; ;	
			•	
			; ; ;	
. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM			· ·	
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized	by a Debtor, check here and enter name of E	DEBTOR auth	orizing this Amendment	t.
Alabama Power Company			:	
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
0. OPTIONAL FILER REFERENCE DATA				

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20101029000362650 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

13. Use this space for additional information

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Shelby Cnty Judge of Probate, AL 01/04/2016 02:52:18 PM FILED/CERT

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