A NAME & PHONE OF CONTACT AT FILER [Opional]  ANAME & PHONE OF CONTACT AT FILER [Opional]  Alabama Power Company 600 18th St N  Birmingham, AL 35203  Birmingham, Alabama Power Instance Concepts Instance Concepts Instance Concepts Instance Concepts	UCC FINANCING STATEMENT AME	NDMENT			
Alabama Power Company 600 18th St N Birmingham, AL 35203  20 160323630693149 112 \$ 1.00 91-10 to City Judge of Probate, 4, 91-10 to Enterpress of the Financing Statement Intelligence of City Judge of Probate, 4, 91-10 to Enterpress of the Financing Statement Intelligence of City Judge of Probate, 4, 91-10 to Enterpress of Enterpr	FOLLOW INSTRUCTIONS (front and back) CAREFULLY  A. NAME & PHONE OF CONTACT AT FILER [optional]			ORIGINAL	
18. INTIAL FNANCING STATEMENT ALEXADERY T   20110202000036300	B. SEND ACKNOWLEDGMENT TO: (Name and Address)  Alabama Power Company 600 18th St N		Shelby Cnty Judge	e of Probate, AL	
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Securice Party authorizing this Continuation Statement is continued for the additional period provided by applicable (and period period period period provided by applicable (and period p				b. This FINANCING STAT	EMENT AMENDMENT is
3. CONTRIBUTION: Efficiences of the Fertices Subtrement is possible above with respect to security interest(s) of the Secured Party authorizing that Continuation Biotenness is confined for the additional percet provided by applicable law.  4. ASSIGNMENT (full of parall). Give name of assignee in liter 7 or 75 and additional percet provided by applicable law.  5. AMENDMENT (PARTY INFORMATION). This Amendment affects				REAL ESTATE RECOR	DS.
CANAGE name and/ox address. Give current record name is lam file or 8b; also give new many for a many of the and/or new address (if applicable for 7c. and about name of the and/or new address (if applicable for 7c. and about name of the and/or new address (if applicable for 7c. and about name of the and/or new address (if applicable for 7c. and about name of the and/or new address (if applicable for 7c. and about name of the and/or new address (if applicable for 7c. and about name of the and/or new address (if applicable for 7c. and about name of the and/or new address (if applicable for 7c. and about name of the and/or new address (if applicable for 7c. and about name of the and/or new address (if applicable for 7c. and about name of the and/or name of the an	<ol> <li>CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law</li> <li>ASSIGNMENT (full or partial): Give name of assignee in ite</li> </ol>	nt identified above with respect in the spect of the state of the stat	to security interest(s) of the Secured Pa	rty authorizing this Continua	
Ge. ORGANIZATION'S NAME  OR 50. INDIVIDUAL'S LAST NAME SCHWEERS-LIVINGSTON JULIA ELIZABETH  7. CHANGED (NEW) OR ADDED INFORMATION:  7. MAILING ADDRESS  CITY STATE POSTAL CODE COUNTRY  SO 4 HILLSBORD LN  7. TAXID #: SSN OR RIN ADDL INFO RE TO TYPE OF ORGANIZATION ORGANIZATIO				ADD name: Complete item 7c; also complete	item 7a or 7b, and also items 7d-7g (if applicable
SCHWERS-LIVINGSTON  7. CHANGED (NEW) OR ADDED INFORMATION:  72. ORGANIZATION'S NAME  OR  75. INDIVIDUAL'S LAST NAME  FIRST NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  SUFFIX  TO MAILING ADDRESS  GITY  STATE  FOSTAL CODE  COUNTRY  SO4 HILLSBORD LN  AL 35080  US  TO TAX ID IF. SSN OR EN ADDRESS  ADDRESS  ADDRESS  ADDRESS  FOR TYPE OF ORGANIZATION  DEBTOR  TO TURNISDICTION OF ORGANIZATION  DEBTOR  TO TURNISDICTION OF ORGANIZATION  TO TURNISDICTION  TO TURNISDICTION OF ORGANIZATION  TO TURNISDICTION OF ORGANIZATION  TO TURNISDICTION  TO TURNISDI	6. CURRENT RECORD INFORMATION:				
77a. CRGANIZATION'S NAME  FIRST NAME  FIRST NAME  MIDDLE NAME  SUFFIX  TO MAILING ADDRESS  TOTY  STATE  POSTAL CODE  COUNTRY  HELENA  AL  35080  US  TO TAX ID #: SSN OR EIN  ADDLINFO RE  TO GROANIZATION  DEBTOR  B. 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.  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.  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.  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 this Amendment.	100. INDIVIDUAL'S LAST NAME				SUFFIX
76. MAILING ADDRESS 504 HILLSBORO LN HELENA AL 35080 US 76. TAX ID #. SSN OR EIN ADD'LINFO RE ORGANIZATION OR					
504 HILLSBORD LN  7d. TAX ID #: SSN OR EIN   ADDILINFO RE   7e. TYPE OF ORGANIZATION   7f. JURISDICTION OF ORGANIZATION   7g. ORGANIZATIONAL ID #. If any   Not    8. AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral   deleted or   added, or give entire   restated collateral description, or describe collateral   assigned.	OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	· · · · · · · · · · · · · · · · · · ·	AIDDLE NAME	SUFFIX
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.  9. Rabama Power Company  OR Describe collateral assignment.					1
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.  9. Record Alabama Power Company  OR DEBTOR NAME    Alabama Power Company	ORGANIZATION '	ANIZATION 7f. JURISDIC	TION OF ORGANIZATION 7	g. ORGANIZATIONAL ID #,	if any
OR INDIVIDUALIS LAST NAME	9. NAME OF SECURED PARTY OF RECORD AUTHORIZED adds collateral or adds the authorizing Debtor, or if this is a Termina 9a. ORGANIZATION'S NAME	restated collateral description, or	me of assignor, if this is an Assignment).	If this is an Amendment auth R authorizing this Amendme	orized by a Debtor which nt.
	OR	FIRST NAME	N	IIDDLE NAME	SUFFIX

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20110202000036300

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME

Alabama Power Company

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

13. Use this space for additional information

20160323000093140 2/2 \$.00 Shelby Cnty Judge of Probate, AL 03/23/2016 12:59:56 PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY