

VII AND DECEMBER OF THE PARTY O	NT		
DLLOW INSTRUCTIONS (front and back) CAREFULLY			
N. NAME & PHONE OF CONTACT AT FILER [optional]			
Laylon Mikula 205-226-1402			
. SEND ACKNOWLEDGMENT TO: (Name and Address)			
Alabama Power Company	201603230000	93210 1/2 \$.00	
600 18th St N	Shelby Cnty	Judge of Probate, AL	
Birmingham, AL 35203	03/23/2016 0	01:00:03 PM FILED/CERT	
<b>1</b>			
	THE ABOVE S	SPACE IS FOR FILING OFFICE L	
. INITIAL FINANCING STATEMENT FILE # 20091217000462320		1b. This FINANCING STATEM to be filed [for record] (or re	
		REAL ESTATE RECORDS	,
TERMINATION: Effectiveness of the Financing Statement identified above			
CONTINUATION: Effectiveness of the Financing Statement identified ab continued for the additional period provided by applicable law.	bove with respect to security interest(s) of the Secu	red Party authorizing this Continuation	Statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and			
AMENDMENT (PARTY INFORMATION): This Amendment affects Do Also check one of the following three boxes and provide appropriate information in	Debtor or Secured Party of record. Check only	y <u>one</u> of these two boxes.	
CHANGE name and/or address: Give current record name in item 6a or 6b; a	Iso give new TIDELETE name: Give record n	ame	n 7a or 7h, and also
name (if name change) in item 7a or 7b and/or new address (if address change)	ge) in item 7c. to be deleted in item 6a or 6b.	item 7c; also complete iter	ns 7d-7g (if applica
CURRENT RECORD INFORMATION:  6a. ORGANIZATION'S NAME		——————————————————————————————————————	
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
MOONEY	KEVIN	M	SOFFIX
CHANGED (NEW) OR ADDED INCODMATION:		141	
CHANGED (NEW) OR ADDED INFORMATION:  7a. ORGANIZATION'S NAME			<u></u>
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
MOONEY	SHARON	A	
. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
824 REACH CREST	BIRMINGHAM	AL 35242	US
. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if a	
ORGANIZATION '			
IDEBIOR I			
AMENDMENT (COLLATERAL CHANGE): check only one have			NC
AMENDMENT (COLLATERAL CHANGE): check only one box.			N(
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigne	ed.	N
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigne	ed.	N
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigne	ed.	N
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigne	ed.	N
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigne	ed.	
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigne	ed.	N N N N N N N N N N N N N N N N N N N
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigne	ed.	N N N N N N N N N N N N N N N N N N N
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigne	ed.	
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigne	ed.	N
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigned	ed.	
AMENDMENT (COLLATERAL CHANGE): check only one box.	eral description, or describe collateral assigned	ed.	
AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collate  restated collateral deleted or stated collateral deleted or added, or give entire restated collateral deleted or stated collateral deleted or added, or give entire restated collateral deleted or stated collateral	MENDMENT (name of assignor, if this is an Assign	ment). If this is an Amendment authoriz	
AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collate  restated collate  restated collate  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN  adds collateral or adds the authorizing Debtor, or if this is a Termination authorized	MENDMENT (name of assignor, if this is an Assign	ment). If this is an Amendment authoriz	
AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collate  restated collate  restated collate  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN  adds collateral or adds the authorizing Debtor, or if this is a Termination authorized  9a. ORGANIZATION'S NAME	MENDMENT (name of assignor, if this is an Assign	ment). If this is an Amendment authoriz	
AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collate  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN adds collateral or adds the authorizing Debtor, or if this is a Termination authorized.  9a. ORGANIZATION'S NAME  Alabama Power Company	MENDMENT (name of assignor, if this is an Assign	ment). If this is an Amendment authoriz	
AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collate  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN adds collateral or adds the authorizing Debtor, or if this is a Termination authorized and ORGANIZATION'S NAME  Alabama Power Company	MENDMENT (name of assignor, if this is an Assign	ment). If this is an Amendment authoriz	ed by a Debtor whic
AMENDMENT (COLLATERAL CHANGE): check only one box.  Describe collateral deleted or added, or give entire restated collate  NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN adds collateral or adds the authorizing Debtor, or if this is a Termination authorized.  9a. ORGANIZATION'S NAME  Alabama Power Company	MENDMENT (name of assignor, if this is an Assigni d by a Debtor, check here and enter name of Di	ment). If this is an Amendment authoriz EBTOR authorizing this Amendment.	

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20091217000462320 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

201603230000093210 2/2 \$.00 Shelby Cnty Judge of Probate, AL 03/23/2016 01:00:03 PM FILED/CERT

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY