

NAME & PHONE OF CONTACT AT FILER [optional]			
SINDY THOMAS 205-326-8299		0160527000182130 1/1 \$ 00	
SEND ACKNOWLEDGMENT TO: (Name and Address)	5	Shelby Cnty Judge of Probate,	
		5/27/2016 11:07:32 AM FILED/C	CERT
ALABAMA GAS CORPORATI	ION		
2101 6TH AVE NORTH			
BIRMINGHAM, AL 35203			
	THE A	BOVE SPACE IS FOR FILING OFFICE U	
INITIAL FINANCING STATEMENT FILE # 20140128000026860		to be filed [for record] (or re REAL ESTATE RECORDS.	
TERMINATION: Effectiveness of the Financing Statement idea	entified above is terminated with respect to security interes		nation Statement.
CONTINUATION: Effectiveness of the Financing Statement			
continued for the additional period provided by applicable law.			<u> </u>
ASSIGNMENT (full or partial): Give name of assignee in item	7a or 7b and address of assignee in item 7c; and also g	ive name of assignor in item 9.	···
AMENDMENT (PARTY INFORMATION): This Amendment a		heck only <u>one</u> of these two boxes.	
Also check one of the following three boxes and provide appropriate in	_	record name	n 7a or 7b, and also
CHANGE name and/or address: Give current record name in item name (if name change) in item 7a or 7b and/or new address (if acceptance)	ddress change) in item 7c. to be deleted in item		
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS	FIRST NAME CITY	MIDDLE NAME STATE POSTAL CODE	COUNTRY
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 01 FRONTIER DR	FIRST NAME CITY PELHAM	MIDDLE NAME STATE POSTAL CODE AL 35124-1562	COUNTRY
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 01 FRONTIER DR ADD'L INFO RE 7e. TYPE OF ORGAN ORGANIZATION	FIRST NAME CITY PELHAM	MIDDLE NAME STATE POSTAL CODE AL 35124-1562	COUNTRY US
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