UCC FINANCING STATEMENT AMENDN FOLLOW INSTRUCTIONS	/ENT				
A. NAME & PHONE OF CONTACT AT FILER (optional)					
B. E-MAIL CONTACT AT FILER (optional)					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
First Citizens Bank 475 Greenville Bypass		20160627000	221060	1/1 \$.00 of Probate, AL	
Greenville, Alabama 36037		06/27/2016	09:10:40	AM FILED/CERT	
40 INTIAL FINIANCINO STATEMENT EU E NUMBER				R FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20090505000165880		1b. This FINANCING STATI (or recorded) in the REA Filer. attach Amendment A	FESIMIE	ENDMENT IS to be filed [for RECORDS m UCC3Ad) <u>and</u> provide Debto	
 TERMINATION: Effectiveness of the Financing Statement identification Statement 	ied above is terminated				
3. ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate af	7a or 7b, <u>and</u> address of	of Assignee in item 7c <u>and</u> name 8	of Assigno	r in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement iden continued for the additional period provided by applicable law		· · · · · · · · · · · · · · · · · · ·	cured Party	authorizing this Continuation	n Statement is
5. PARTY INFORMATION CHANGE:					
Check on these two boxes.	heck <u>one</u> of these three b — CHANGE name and/or	address: Complete ADD na	me: Comple	ete itemDELETE name:	
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Informati	item 6a or 6b; <u>and</u> item ion Change - provide only		b, <u>and</u> item 7	c to be deleted in it	em 6a or 6b
6a. ORGANIZATION'S NAME Columbiana Enterprises, LLC			•		
6b. INDIVIDUAL'S SURNAME	FIRST PERSO	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S) SU	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Part 7a. ORGANIZATION'S NAME	ty Information Change - provide	only <u>one</u> name (7a or 7b) (use exact, full	name; de not e	mit, modify, or abbreviate any part of	the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME				··•·	- · · · · · · · · · · · · · · · · · · ·
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			<u> </u>		SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	ADD collateral	DELETE collateral	RESTATE	covered collateral A	SSIGN collater
3. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral	DELETE collateral	RESTATE	covered collateral A	SSIGN collater
	ADD collateral	DELETE collateral	RESTATE	covered collateral A	SSIGN collater
	ADD collateral	DELETE collateral	RESTATE	covered collateral A	SSIGN collatera
	ADD collateral	DELETE collateral	RESTATE	covered collateral A	SSIGN collatera
Indicate collateral:					
Indicate collateral: 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING To the standard of this is an Amendment authorized by a DEBTOR, check here and pand pand pand pand pand pand pand		Provide only <u>one</u> name (9a or 9b)			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING To the standard of this is an Amendment authorized by a DEBTOR, check here and page 19a. ORGANIZATION'S NAME	THIS AMENDMENT: For provide name of authorizing	Provide only <u>one</u> name (9a or 9b)			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING T If this is an Amendment authorized by a DEBTOR, check here and p	THIS AMENDMENT: For provide name of authorizing	Provide only <u>one</u> name (9a or 9b) ng Debtor	(name of As		SUFFIX