UCC FINANCING STATEMEN	IT A
FOLLOW INSTRUCTIONS	

AMENDMENT

FOLLOW INSTRU	- IIONS				
	E OF CONTACT AT FILER (optional) SHEPPARD 205 254,1185				
B E-MAIL CONTACT AT FILER (optional) Isheppard@maynardcooper.com					
C. SEND ACKNOV	WEEDGEMENT TO. (Name and Address)				
Γ	Lee Sheppard, Esq. Maynard, Cooper & Gale, P.C. 1901 Sixth Avenue North 2400 Regions Harbert Plaza	٦			
L	Birmingham, Alabama 35203				

Shelby Cnty Judge of Probate, AL 07/20/2016 09:53:05 AM FILED/CERT

	L Birmingham, Adabama 30200	1		THE ABOVE SPA	CE IS FOR FILING OFFIC	E USE (ONLY		
	NITIAL FINANCING STATEMENT FILE NUMBER 20030306000136250		1b This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in Item 13						
2. 2	TERMINATION. Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement								
3. [ASSIGNMENT (full or partial): Provide name of Assignee in Item 7a or 7b <u>and</u> address of Assignee in Item 7c <u>and</u> name of Assignor in Item 9 For partial assignment, complete Items 7 and 9 <u>and</u> also indicate effected collateral in Item 8								
4. [CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law								
	5. PARTY INFORMATION CHANGE: Check one of these two boxes: This change affects: Debtor or Secured Party of record AND Check one of these three boxes to: CHANGE name and/or address: Complete ADD name: Complete Item DELETE name: Give record name Item 6a or 6b and Item 7a or 7b and Item 7c 7a or 7b and Item 7c to be deleted in Item 6a or 6b								
6. C	CURRENT RECORD INFORMATION. Complete for Party Information Change – provide only one name (6a or 6b)								
	6a. ORGANIZATION'S NAME								
OR	66. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	·	ADDITIONAL NAME(S) INIT	IAL(S)	SUFFIX		
7 CH	CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change – provide only one name (7a or 7b guise exact full name, do not omit, modify or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX								
7c. M	AILING ADDRESS	CITY		•	STATE POSTAL	CODE	COUNTRY		
	OLLATERAL CHANGE: <u>Also</u> check <u>only</u> one of these four boxes: [ADD collateral	DELETE collateral	RESTATE colla	tera1				
	ME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMEN			ime of Assignor, if thi	s is an Assignment)				
lf 1	If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a ORGANIZATION'S NAME								
OR	9b. INDIVIDUAL'S SURNAME	FIRST PER	RSONAL NAME	ADDITIONAL NAM	IE(S)/INITIAL(S)		SUFFIX		
10. 0	PTIONAL FILER REFERENCE DATA (a) TO BE FILED WITH: Shelby County, AL; (b) Projection	ct Name: Region	ns/Mayer; (c) MCG Fil	e #14909-0172					