

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

20160721000255330 1/2 \$32.00
Shelby Cnty Judge of Probate, AL
07/21/2016 11:08:24 AM FILED/CERT

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 24449 - CITIMORTGAGE.	
CT Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	54882790 ALAL FIXTURE
File with: Shelby, AL	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME					
OR	1b. INDIVIDUAL'S SURNAME DESHAZO		FIRST PERSONAL NAME ALTON	ADDITIONAL NAME(S)/INITIAL(S) L	SUFFIX
1c. MAILING ADDRESS 5111 CAHABA VALLEY ROAD		CITY BIRMINGHAM	STATE AL	POSTAL CODE 35243	COUNTRY USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME DESHAZO		FIRST PERSONAL NAME FRANCES	ADDITIONAL NAME(S)/INITIAL(S) K	SUFFIX
2c. MAILING ADDRESS 5111 CAHABA VALLEY ROAD		CITY BIRMINGHAM	STATE AL	POSTAL CODE 35243	COUNTRY USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME SMALL BUSINESS ADMINISTRATION					
OR	3b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS P.O. BOX 12247		CITY BIRMINGHAM	STATE AL	POSTAL CODE 35202	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

A 1994 SUNSHINE S-409 MOBILE HOME, SERIAL # ALS33193A/ALS33193B, NOW OWNED, HEREAFTER ACQUIRED, OR PURCHASED IN WHOLE OR IN PART FROM THE PROCEEDS OF THIS LOAN, AND/OR THE PROCEEDS OF ANY DISPOSITION THEREOF. INCLUDING BUT NOT LIMITED TO THE FOLLOWING LOCATION: 5111 CAHABA VALLEY ROAD, BIRMINGHAM, ALABAMA 35243, ON LAND OWNED BY MARGARET VIRGINIA DESHAZO.

Complete only when filing with the Judge of Probate:
The initial indebtedness secured by this financing statement is \$0.00
Mortgage tax due (\$.15 per \$100.00 or fraction thereof) \$0.00

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative					
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility			6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing		
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor					
8. OPTIONAL FILER REFERENCE DATA: 54882790 81026 1119853736					

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME
DESHAZO

FIRST PERSONAL NAME
ALTON

ADDITIONAL NAME(S)/INITIAL(S)
L

SUFFIX

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10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:
☐ covers timber to be cut ☐ covers as-extracted collateral ☒ is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:
5111 CAHABA VALLEY ROAD
BIRMINGHAM, ALABAM 35243

17. MISCELLANEOUS: 54882790-AL-117 24449 - CITIMORTGAGE, INC SMALL BUSINESS ADMINISTRATION File with: Shelby, AL 81026 1119853736