ICC FINANCING STATEMENT OLLOW INSTRUCTIONS	Sully	36 AC
NAME & PHONE OF CONTACT AT FILER (optional CINDY THOMAS 205-326-8299)	ional)	

A. NAME & PHONE OF CONTACT AT FILER (optional)	
CINDY THOMAS 205-326-8299	
B. E-MAIL CONTACT AT FILER (optional)	
cindy.thomas@SpireEnergy.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
ALABAMA GAS CORPORATION	•
2101 6TH AVE NORTH	
BIRMINGHAM, AL 35203	_

20160727000262430 1/2 \$37.40
Shelby Cnty Judge of Probate, AL
07/27/2016 11:37:12 AM FILED/CERT

_	101 6TH AVE NORTH BIRMINGHAM, AL 35203				
<u>L</u>		THE ABO	VE SPACE IS FO	R FILING OFFICE USE	ONLY
	NAME: Provide only <u>one</u> Debtor name (1a or t in line 1b, leave all of item 1 blank, check here	1b) (use exact, full name; do not omit, modify, or abbreviate an and provide the Individual Debtor information in item 10	y part of the Debtor of the Financing St	r's name); if any part of the Ir atement Addendum (Form U	ndividual Debto CC1Ad)
1a. ORGANIZ	ATION'S NAME				
OR 1b. INDIVIDU	AL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
BOLT	ON	LOUISE	\mathbf{J}		
1c. MAILING ADE		CITY	STATE	POSTAL CODE	COUNTRY
	LOWBEND RD	PELHAM	AL	35124-1542	US
ZO. INDIVIDO	AL'S SURNAME	FIRST PERSONAL NAME		NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADE	RESS	CITY	STATE	POSTAL CODE	COUNTRY
3 SECURED	PARTY'S NAME (or NAME of ASSIGNEE of	f ASSIGNOR SECURED PARTY): Provide only <u>one</u> Secured P	arty name (3a or 3i	o)	
3a. ORGANI	PARTY'S NAME (or NAME of ASSIGNEE of ATION'S NAME AMA GAS CORPORATI		arty name (3a or 3)		
3a. ORGANIZ	ATION'S NAME			NAL NAME(S)/INITIAL(S)	SUFFIX
3a. ORGANIZ ALAB OR 3b. INDIVIDU	AMA GAS CORPORATI AL'S SURNAME	ON			SUFFIX
3a. ORGANIZ ALAB OR 3b. INDIVIDU 3c. MAILING ADD	AMA GAS CORPORATI AL'S SURNAME	ON FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	

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

\$3520.00

UCC FINANCING STATEMENT ADDENDUM

Carried Street

NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement because Individual Debtor name did not fit, check here	nt; if line 15 was left blank						
9a. ORGANIZATION'S NAME		20	0160727000) 126243	0 2/2 \$ 37.	40	
	<u> </u>	Sł	helby Cnty	/ Judg	e of Proba :12 AM FIL	ite, AL	
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9b. INDIVIDUAL'S SURNAME	· ·						
BOLTON	<u>. </u>	4					
FIRST PERSONAL NAME LOUISE		Ì					
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	1					
J		Т	HE ABOVE	SPACE	S FOR FILING	G OFFICE U	SE ONL
DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name		in line 1b	or 2b of the Fi	nancing S	tatement (Form	UCC1) (use e	exact, full n
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the 10a. ORGANIZATION'S NAME							
100. O(Q/(11.25 (7) O (1 m m))							
10b. INDIVIDUAL'S SURNAME				- , , , , , , , , , , , , , , , , , , ,			
INDIVIDUAL'S FIRST PERSONAL NAME				···	·-		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					<u> </u>	<u></u>	SUFFIX
	· · · · · · · · · · · · · · · · · · ·			_	T		
. MAILING ADDRESS	CITY			STATE	POSTAL COD	E	COUNT
			5.7.7 . 7.7				
		/! ^	METAL PROPERTY AND A SECOND	niv one na	ame (11a or 11b	.)	
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11a. ORGANIZATION'S NAME ACTIVE AIR		Y'S NAN					SUFFIX
11a. ORGANIZATION'S NAME ACTIVE AIR	FIRST PERSONAL NAME	Y'S NAM			NAL NAME(S)/I		SUFFIX
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11a. ORGANIZATION'S NAME ACTIVE AIR 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS 060 10TH ST ADDITIONAL SPACE FOR ITEM 4 (Collateral):	CITY CALERA			ADDITIC	NAL NAME(S)/I	NITIAL(S)	COUNT
11a. ORGANIZATION'S NAME ACTIVE AIR 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS 060 10TH ST ADDITIONAL SPACE FOR ITEM 4 (Collateral):	CITY CALERA	EMENT:		STATE	POSTAL COD 35040	NITIAL(S)	COUNTI
11a. ORGANIZATION'S NAME ACTIVE AIR 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS 060 10TH ST ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or recorded) in	CALERA the 14. This FINANCING STAT	EMENT:		STATE	POSTAL COD 35040	NITIAL(S)	US
11a. ORGANIZATION'S NAME ACTIVE AIR 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS 060 10TH ST ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or recorded) in REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in item 16	CALERA the 14. This FINANCING STAT	EMENT:	covers as-e	STATE	POSTAL COD 35040	is filed as a f	COUNTR
11a. ORGANIZATION'S NAME ACTIVE AIR 11b. INDIVIDUAL'S SURNAME MAILING ADDRESS 060 10TH ST ADDITIONAL SPACE FOR ITEM 4 (Collateral): This FINANCING STATEMENT is to be filed [for record] (or recorded) in REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in item 16	the 14. This FINANCING STAT covers timber to be 16. Description of real esta	EMENT:	covers as-e	STATE	POSTAL COD 35040	is filed as a f	COUNTR
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