UCC FINANCING STATEMENT AMENDME	ENT						
FOLLOW INSTRUCTIONS							
A. NAME & PHONE OF CONTACT AT FILER (optional) Barbara Sanders 256-329-7578 74013489							
B. E-MAIL CONTACT AT FILER (optional)		· · · - •					
bsanders@usameribank.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)			EI E 12 E				
USAMERIBANK PO BOX 1237			2016	AB22000	3301900 1/1 \$.00 y Judge of Probati		
ALEXANDER CITY, AL 35011			08/22/2016 11:53:01 AM FILED/CERT				
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	•		THE ABOVE SPA	ACE IS FO	R FILING OFFICE USE	ONLY	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20081104000426920 Shelby Co, AL			b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS				
20081104000426920 Shelby Co, AL 2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated wi			Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13				
Statement	GOOTO TO TOTAL		to the becoming antore	331(3) 01 00	ourou raity authorizing th	- Tommation	
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a For partial assignment, complete items 7 and 9 and also indicate affective.			n item 7c <u>and</u> name	of Assigno	r in item 9		
4. CONTINUATION: Effectiveness of the Financing Statement identification continued for the additional period provided by applicable law	ed above with re	espect to the secu	rity interest(s) of Se	cured Party	authorizing this Continua	tion Statement is	
5. PARTY INFORMATION CHANGE:							
Check one of these (wo boxes.	ck <u>one</u> of these the CHANGE name a	hree boxes to: nd/or address: Con I item 7a or 7b <u>and</u> i	nplete ADD na	me: Comple		: Give record name	
6. CURRENT RECORD INFORMATION: Complete for Party Information				, <u>and</u> item 7	c to be deleted in	i item ba or bb	
6a. ORGANIZATION'S NAME MAL PROPERTIES, L.L.C.							
6b. INDIVIDUAL'S SURNAME	FIRST PE	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party In	formation Change - I	provide only <u>one</u> name (7a or 7b) (use exact, full n	name; do not o	mit, modify, or abbreviate any part	of the Debtor's name)	
7a. ORGANIZATION'S NAME						<u> </u>	
OR 7b. INDIVIDUAL'S SURNAME		<u> </u>				, <u>, , , , , , , , , , , , , , , , , , </u>	
INDIVIDUAL'S FIRST PERSONAL NAME		·		· · · · · · · · · · · · · · · · · · ·			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				·	——————————————————————————————————————	SUFFIX	
7c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY	
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE	collateral	RESTATE (covered collateral	ASSIGN collateral	
Indicate collateral:	, ADD Conatoral			INEO IAIE (overed conateral	ASSIGN CONSTENS	
	<u>-</u>	· · · · · · · · · · · · · · · · · · ·			· - · ·		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and prove the second sec	S AMENDMEN		<u>ne</u> name (9a or 9b) (name of As	signor, if this is an Assignm	ent)	
USAmeriBank, successor by merger to A	liant Ba	nk					
9b. INDIVIDUAL'S SURNAME		RSONAL NAME	<u>.</u>	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
10. OPTIONAL FILER REFERENCE DATA:	. ————						