

UCC FINANCING STATEMENT AMENDMENT

UCC FINANCING STATEMENT AMENI		10/13/2016 01:30:30 PM FILED/CERT					
FOLLOW INSTRUCTIONS							
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858	-5294	<u></u>					
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com							
C. SEND ACKNOWLEDGMENT TO: (Name and Address)							
1224 66407							
Corporation Service Company		•					
801 Adlai Stevenson Drive							
Springfield, IL 62703	Filed Ir	n: Alabama ˌ					
		(Shelby)			:: NA AFFIAF		NII NZ
10 INITIAL CIMANOINO CTATEMENT EILE NIJMBED	·•·		1b. This FINANCING S		R FILING OFFICE		
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20150818000287460 08/18/2015			tor recorded) in thi	6 KEAL COTATE	RECORDS m UCC3Ad) <u>and</u> provid		
2. TERMINATION: Effectiveness of the Financing Statement identification.	entified abov	e is terminated	with respect to the security	interest(s) of Sec	cured Party authorizio	ng this T	ermination
3. ASSIGNMENT (full or partial): Provide name of Assignee in a For partial assignment, complete items 7 and 9 and also indicate				name of Assignor	in item 9		
4. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law	identified ab	ove with respe	ct to the security interest(s)	of Secured Party	authorizing this Con	tinuation	Statement is
5. PARTY INFORMATION CHANGE:	• • • • • • • • • • • • • • • • • • •						
		of these three		DD name: Cample	to itam DELETE	C	ive record seems
This Change affects Debtor or Secured Party of record	item 6	a or 6b; <u>and</u> iten		DD name: Completa or 7b, <u>and</u> item 7			ive record name m 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information		ge - provide onl	y <u>one</u> name (6a or 6b)			·	
6a. ORGANIZATION'S NAMEDunnavant Commercial,	, LLC						
OR CL. INDUVIDUALIS SUIDMANE		TIDOT DEDOC	NIAL NIALET	LADDITIO	MAL MANAE/CV/MITIA	(C)	SUFFIX
6b. INDIVIDUAL'S SURNAME		FIRST PERSO	MAL NAME	ADDITIO	NAL NAME(S)/INITIA	L(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment of	z Party Informat	ion Change - provid	e anly one name (7a or 7h) (use eya	act_full_name: do not or	nit modify or abbreviate a	ny nart of t	he Debtor's name)
7. CHANGED ON ADDED IN CITATION. Complete for Assignment to	n raity internat	ion onange - provid	e only one name (ra or rb) (use exe	act, tall flattic, do flot of	int, mounty, or appressing a	ny part or t	- Debior a manie,
7b. INDIVIDUAL'S SURNAME							
					.		
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUALIC ADDITIONAL MANAGOVINITIALIO							SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)							SUPPIX
7c. MAILING ADDRESS		CITY		STATE	STATE POSTAL CODE		COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes	s: ADE) collateral	DELETE collateral	RESTATE	overed collateral	AS	SIGN collateral
Indicate collateral:							
THE COLUMN OF TH	ied and Record Micial Public R	ecords					
Official Public Records Judge James W. Fuhrmeister, Probate Judge, County Clerk							
10	elby County, A /13/2016 01:30						
47 · · · · · · · · · · · · · · · · · · ·	00 CHERRY 161013000376	160	Jung 1	5			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZIN	NG THIS A	MENDMENT:	Provide only <u>one</u> name (9a d	or 9b) (name of As	signor, if this is an Ass	signment	t)
If this is an Amendment authorized by a DEBTOR, check here		name of authoriz	•	——————————————————————————————————————			
9a. ORGANIZATION'S NAME Servis First Bank							
OR ON INDIVIDUAL'S SUBMANE		SIDET DEDCC	NIAI NIAME	ADDITIO	NAL NIABAEZONALITIA	/e\	QI IEEIV
9b. INDIVIDUAL'S SURNAME		FIRST PERSO	MAVE MANE	ADDITIO	NAL NAME(S)/INITIAI	L(3)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor: Dunna	want Ca	mmoroial	110 0400				1
TO OF THOMAS THE STATE STATES DATA DEDIGIT. DUTING	ivalit UU	amuci Cidi,	LLV - UTUA				1224 6640

1224 66407