

CC FINANCING STATEMENTAMENDMEN	JT	L UIIIVAL	
LLOW INSTRUCTIONS (front and back) CAREFULLY			
NAME & PHONE OF CONTACT AT FILER [optional] aylon Mikula 205-226-1402			
SEND ACKNOWLEDGMENT TO: (Name and Address)			
Alabama Power Company			
600 18th St N		20161020000385270 1/2 \$.00	
Birmingham, AL 35203	20161020 Shelby (Inty Judge of Probate,	AL
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INITIAL FINANCING STATEMENT FILE #	THE ABOV	1b. This FINANCING STA	
20120416000129040		to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.	
★ TERMINATION: Effectiveness of the Financing Statement identified above it.	is terminated with respect to security interest(s)		
CONTINUATION: Effectiveness of the Financing Statement identified about	ove with respect to security interest(s) of the S	ecured Party authorizing this Continu	uation Statement is
continued for the additional period provided by applicable law.	· · · · · · · · · · · · · · · · · · ·		
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give no	ame of assignor in item 9.	
lanuari de la companya de la company	ebtor or Secured Party of record. Check	only <u>one</u> of these two boxes.	
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in CHANGE name and/or address: Give current record name in item 6a or 6b; also		d name	e item 7a or 7h, and als
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change)	e) in item 7c. to be deleted in item 6a or		e items 7d-7g (if applic
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME	······································	'',*.i.''	
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
CIENFUEGOS	MARTHA		
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME CLENIELIECOS	FIRST NAME	MIDDLE NAME	SUFFIX
CIENFUEGOS MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTR
1300 OLD CAHABA COVE	HELENA	AL 35080	US
TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #	
ORGANIZATION ' DEBTOR			
AMENDMENT (COLLATERAL CHANGE): check only one box.			
escribe collateral deleted or added, or give entire restated collater	ral description, or describe collateral assi	gned.	
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM	ENDMENT (name of assignor, if this is an Ass	ignment). If this is an Amendment au	thorized by a Debtor wh
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AM adds collateral or adds the authorizing Debtor, or if this is a Termination authorized	ENDMENT (name of assignor, if this is an Assiby a Debtor, check here and enter name o	ignment). If this is an Amendment au f DEBTOR authorizing this Amendm	thorized by a Debtor whent.
dds collateral or adds the authorizing Debtor, or if this is a Termination authorized	ENDMENT (name of assignor, if this is an Assiby a Debtor, check here and enter name of	ignment). If this is an Amendment au f DEBTOR authorizing this Amendm	thorized by a Debtor whent.
	ENDMENT (name of assignor, if this is an Assign and enter name of assig	ignment). If this is an Amendment au f DEBTOR authorizing this Amendm	thorized by a Debtor whent.
odds collateral or adds the authorizing Debtor, or if this is a Termination authorized 9a. ORGANIZATION'S NAME Alabama Power Company	by a Debtor, check here and enter name of	DEBTOR authorizing this Amendm	nent.

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20120416000129040 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

13. Use this space for additional information



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