UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTA	• • •	
TIFFANY MCVAY	334-564-2861	
B. E-MAIL CONTACT AT FILE	R (optional)	
C. SEND ACKNOWLEDGMEN	T TO: (Name and Address)	
FIRST US BANK		
FKA FIRST UNIT	ED SECURITY BANK	į
131 WEST FRONT	Γ STREET	
PO BOX 249		
THOMASVILLE,	AL 36784	
		
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Shelby Cnty Judge of Probate, AL

A. NAME & PHONE OF CONTACT AT FILER (optional) TIFFANY MCVAY 334-564-2861	10/27/2016 11:10:58 AM FILED/CERT		
B. E-MAIL CONTACT AT FILER (optional)			
C. CENID ACKNOVAS EDCMENIT TO: (Name and Address)			
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FKA FIRST UNITED SECURITY BANK			
131 WEST FRONT STREET PO BOX 249			
THOMASVILLE, AL 36784			
- Individed the state of the st	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		
1a. INITIAL FINANCING STATEMENT FILE NUMBER	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS		
2015301000078490	Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13		
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminal Statement	ated with respect to the security interest(s) of Secured Party authorizing this Termination		
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address For partial assignment, complete items 7 and 9 and also indicate affected collateral in	ess of Assignee in item 7c <u>and</u> name of Assignor in item 9 item 8		
4. CONTINUATION: Effectiveness of the Financing Statement identified above with recontinued for the additional period provided by applicable law	spect to the security interest(s) of Secured Party authorizing this Continuation Statement is		
5. PARTY INFORMATION CHANGE:			
Check one of these two boxes: AND Check one of these these these these these are are also as the change are also	ree boxes to: nd/or address. Complete " " ADD name: Complete item DELETE name." Give record name		
This Change affects Debtor or Secured Party of record item 6a or 6b; and	item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b		
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide	only <u>one</u> name (6a or 6b)		
6a. ORGANIZATION'S NAME			
SBDEV. CORP	RSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
6b. INDIVIDUAL'S SURNAME	RSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - p. 7a. ORGANIZATION'S NAME	rovide only <u>one</u> name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)		
7 a. Ortoritizationo italiniz			
7b. INDIVIDUAL'S SURNAME			
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		
	DELETE Collateral NESTATE Covered collateral NOOICH collateral		
Indicate collateral:			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMEN	NT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)		
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorized by a DEBTOR.			
9a. ORGANIZATION'S NAME			
FIRST UNITED SECURITY BANK NKA FIRST	Γ US BANK		
OD. HADIVIDONE O CONTRACTOR	RSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		
10. OPTIONAL FILER REFERENCE DATA:			

860003370--S B DEV. CORP.---MATT MORRIS--CALERA OFFICE