| UCC FINANCING STATEMENT AMENDMEI | NT . | | | |
|--|-----------------------------|--|---|---|
| A NAME & PHONE OF CONTACT AT FILER (optional) Cynthia Smith 678-839-4476 | | | | |
| B E-MAIL CONTACT AT FILER (optional) | | | | |
| elsmith@bankozarks.com | <u></u> | 018:013:00 | | |
| C SEND ACKNOWLEDGMENT TO. (Name and Address) | | | | |
| | | 20170303000074 | 4850 1/2 \$.00 | |
| Community & Southern Bank | • | | udge of Probate: AL :41 52 PM FILED/CERT | |
| PO Box 280 | | 0070072017 01 | . The Cartest | |
| Carrollton GA 30112 | i | | | |
| | | THE ABOVE SPA | ACE IS FOR FILING OFFICE USI | E ONLY |
| 1a INITIAL FINANCING STATEMENT FILE NUMBER | 1 | b This FINANCING STATE | MENT AMENDMENT is to be filed [for LESTATE RECORDS | or record) |
| Instrument #20160527000182290 | | | idendum (Form UCC3Ad) <u>and</u> provide De | |
| 2 Z TERMINATION Effectiveness of the Financing Statement identified ab Statement | ove is terminated w | ith respect to the security intere | est(s) of Secured Party authorizing th | nis Termination |
| 3 ASSIGNMENT (full or partial) Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and also indicate affected | | | of Assignar in item 9 | |
| 4 CONTINUATION Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law | above with respect | to the security interest(s) of Sec | cured Party authorizing this Continua | ation Statement is |
| 5 PARTY INFORMATION CHANGE. | | | | |
| Check one of these (wo poxes | one of these three bo | | mo: Complete item — DELETE come | a. Give record name |
| This Change affects Debtor or Secured Party of record tem | 6a or 6b. <u>and</u> item 7 | ddress Complete a or 7b <u>and</u> item 7c7a or 7b | and item 7c to be deleted i | e. Give record name in item 6a or 6b |
| CURRENT RECORD INFORMATION: Complete for Party Information Ch 6a ORGANIZATION'S NAME | ange - provide only g | ne name (6a or 6b) | · · · · · · · · · · · · · · · · · · · | |
| Adams Homes AEC LLC an Alabama lim | ited liabilit | vcompany-record | l owner | |
| OR 66 INDIVIDUAL'S SURNAME | FIRST PERSON | | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | | |
| 7 CHANGED OR ADDED INFORMATION Complete for Assignment or Party Inform | nation Change - provide o | nly <u>one</u> name (7a or 7b) (use exact, fuil n | name, do not omit, modify, or abbreviate any par | rt of the Debtor's name) |
| 7a ORGANIZATION'S NAME | | | | |
| OR 76 INDIVIDUAL'S SURNAME | | | | |
| | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | . |
| INDIVIDUAL'S ADDITIONAL NAME(S/INITIAL(S) | | | | SUFFIX |
| 7c MAILING ADDRESS | CITY | | STATE POSTAL CODE | COUNTRY |
| TO MINIERRO RIBURESO | | | JANE TOWNS | - COOMING |
| 8. COLLATERAL CHANGE: Also check one of these four boxes A | DD collateral | DELETE collateral | RESTATE covered collateral | ASSIGN collatera |
| Indicate collateral | | | KESTATE COVERED CONSIGNATION | J 71331311 COMOTOR |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| O NAME OF SECURED DARTY OF DECORD AUTHORIZING THIS | AMENDMENT: D | | | |
| NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS. If this is an Amendment authorized by a DEBTOR, check here and provided | e name of authorizing | · | (name of Assignor If this is an Assignir | nent) |
| 9a ORGANIZATION'S NAME | | | | · |
| Bank of the Ozarks successor by merger t | | - | | |
| 9b INDIVIDUAL'S SURNAME | FIRST PERSON | AL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| 40 OPTIONAL EURO DESERVACE DATE: | | . | | |
| 10. OPTIONAL FILER REFERENCE DATA Shelby AL | | | | |
| | ··· | | | |

| INTIAL FINANCING STATEMENT FILE NUMBER Same Instrument #20160527000182290 | as item 1a on Amendment | form | | | |
|--|-----------------------------|------------------------|---------------------------------------|---|------------------|
| AME OF PARTY AUTHORIZING THIS AMENDMENT: S | Same as item 9 on Amendm | nent form | | | |
| 2a ORGANIZATION'S NAME Bank of the Ozarks successor by m | erger to Comn | nunity & | | | III |
| Southern Bank | | | | | |
| 25 INDIVIDUAL'S SURNAME | | | 2017030 | 03000074850 2/2 \$.00 Cnty Judge of Probate AL | o T |
| | | | 03/03/ | Chty Judge of Probato 2017 01.41:52 PM FILED/CER | |
| FIRST PERSONAL NAME | | | | | |
| ADDITIONAL NAME(S)/INITIAL(S) | | SUFFIX | | | |
| ADDITIONAL MARKE(S)/HTCHAL(S) | | | THE ABOVE | SPACE IS FOR FILING OFFICE I | JSE ONLY |
| ame of DEBTOR on related financing statement (Name of Debter name (13a or 13b) (was great), full same, do not on the | | | | | 13) Provide only |
| ne Debtor name (13a or 13b) (use exact full name, do not omit 3a ORGANIZATION'S NAME | modify, or approviate any j | pan of the Deptor's na | ime); see instruction | ns it name does not tit | |
| Adams Homes AEC LLC an Alaba | ma limited lial | bilitycompa | ny-record | owner | |
| 36 INDIVIDUAL'S SURNAME | FIRST PE | ERSONAL NAME | · · · · · · · · · · · · · · · · · · · | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| DDITIONAL SPACE FOR ITEM 8 (Collateral) | | | | | |
| DDITIONAL SPACE FOR ITEM 8 (Collateral) | | | | | |

18. MISCELLANEOUS: