UCC FINANCING STATEMENT AMENDMENT Shelby Cnty Judge of Probate, AL **FOLLOW INSTRUCTIONS** 03/03/2017 02:20:34 PM FILED/CERT A. NAME & PHONE OF CONTACT AT FILER (optional) 1-800-858-5294 Corporation Service Company B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) 1278 95926 Prepared By: Corporation Service Company Filed In: Alabama 801 Adlai Stevenson Drive Springfield, IL 62703-4261 (Shelby) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a, INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS 20120727000271390 7/27/2012 Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 4. ONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law PARTY INFORMATION CHANGE: AND Check one of these three boxes to: Check one of these two boxes: DELETE name: Give record name CHANGE name and/or address: Complete ADD name: Complete item to be deleted in item 6a or 6b item 6a or 6b; and item 7a or 7b and item 7c 7a or 7b, <u>and</u> item 7c This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAMECOVENANT Classical School Valleydale Road, LLC ADDITIONAL NAME(S)/INITIAL(S) 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME

9. l	NAME OF SECURED PARTY OF RECORD AUTI f this is an Amendment authorized by a DEBTOR, check he	HORIZING THIS AMENDMENT: Provide only <u>one</u> name (9a decreption of authorizing Debtor	or 9b) (name of Assignor, if this is an Assignme	nt)
	9a. ORGANIZATION'S NAME Servis First Bank			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

CITY

ADD collateral

10. OPTIONAL FILER REFERENCE DATA: 15840

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

COLLATERAL CHANGE: Also check one of these four boxes:

7c. MAILING ADDRESS

Indicate collateral:

1278 95926

SUFFIX

SUFFIX

COUNTRY

ASSIGN collateral

POSTAL CODE

STATE

DELETE collateral

RESTATE covered collateral