

. NAME & PHONE OF CONTACT AT FILER [optional]				
aylon Mikula 205-226-1402				
SEND ACKNOWLEDGMENT TO: (Name and Address)				
		<b>                                    </b>	P/2000 Programme	
Alabama Power Company				
600 18th St N		20170411000121480	<b>                                   </b>	l
Birmingham, AL 35203		Shelby Cnty Judge ( 04/11/2017 10:12:1		
		7.7.17.2017 10.12.1	/ HIT FILED/CERS	
<b>‡</b>				
	THI	E ABOVE SPACE IS FO		
INITIAL FINANCING STATEMENT FILE # 20130410000148620		1b. This FINANCING STATEMENT AMENDMENT to be filed [for record] (or recorded) in the		
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect		REAL ESTATE RECORDS.		
CONTINUATION: Effectiveness of the Financing Statement is			<del></del>	· · · · · · · · · · · · · · · · · · ·
continued for the additional period provided by applicable law.		or the december atty same	The Sommand	
ASSIGNMENT (full or partial): Give name of assignee in item	7a or 7b and address of assignee in item 7c, and al	so give name of assignor in i	tem 9.	
AMENDMENT (PARTY INFORMATION): This Amendment at	ffects Debtor or Secured Party of record	. Check only <u>one</u> of these to	wo boxes.	
Also check one of the following three boxes and provide appropriate in		Sing appeared appears	D. name: Camplata itam	. Za az Zh. and ele
CHANGE name and/or address: Give current record name in item name (if name change) in item 7a or 7b and/or new address (if ad-	dress change) in item 7c DELETE name: ( to be deleted in item		Diname: Complete item n 7c; also complete item	
CURRENT RECORD INFORMATION:  6a. ORGANIZATION'S NAME	·	<del></del>	······································	<del> </del>
Od. ONOMIZATION O WAINE				
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE N	MIDDLE NAME SUFFIX	
JOHNSON	JEREMY			
CHANGED (NEW) OR ADDED INFORMATION:		<u> </u>		<del> </del>
7a. ORGANIZATION'S NAME		<u> </u>	<del></del>	
3				•
76. INDIVIDUAL'S EAST NAME	FIRST NAME	MIDDLE N	NAME	SUFFIX
JOHNSON	PAUL	E	IDOCTAL CODE	COLINITE
MAILING ADDRESS 4136 LOWELL RD	MAYSLICK	i	POSTAL CODE	US
TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGAN			NIZATIONAL ID #, if an	
ORGANIZATION DEBTOR		J. G. V. G.		
IDEDICIN	<b>∤</b>			^
	<u>, , , , , , , , , , , , , , , , , , , </u>			
AMENDMENT (COLLATERAL CHANGE); check only <u>one</u> box		assigned		
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AMENDMENT (COLLATERAL CHANGE): check only one box describe collateral deleted or added or give entire res	tated collateral description, or describe collateral			
AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added or give entire res	stated collateral description, or describe collateral	is an Assignment). If this is a		ed by a Debtor wi
AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added or give entire res	stated collateral description, or describe collateral	is an Assignment). If this is a		ed by a Debtor wh
AMENDMENT (COLLATERAL CHANGE); check only one box Describe collateral deleted or added, or give entire resolved.  NAME OF SECURED PARTY OF RECORD AUTHORIZINg adds collateral or adds the authorizing Debtor, or if this is a Termination	stated collateral description, or describe collateral	is an Assignment). If this is a		ed by a Debtor wh
AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added or give entire res	stated collateral description, or describe collateral	is an Assignment). If this is a	izing this Amendment.	ed by a Debtor wh

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20130410000148620 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME OR Alabama Power Company 12b. INDIVIDUAL'S LAST NAME

FIRST NAME

13. Use this space for additional information



MIDDLE NAME, SUFFIX

Shelby Cnty Judge of Probate, AL 04/11/2017 10:12:17 AM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY