CC FINANCING STATEMENT AMEN	IDMENT				
NAME & PHONE OF CONTACT AT FILER [optional]	1				
SEND ACKNOWLEDGMENT TO (Name and Address)		201707100002453		•	
(Tame and Address)		Shelby Cnty Jud 07/10/2017 02:0			
ALABAMA GAS CORPORATIO 2101 6TH AVE NORTH BIRMINGHA, AL 35203	N I				
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INITIAL FINANCING STATEMENT FILE #		THE ABOVE OF	1b The	s FINANCING STATEME	NT AMENDMENT
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✓ TERMINATION: Effectiveness of the Financing Statement ide					
CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law	t identified above with respect to secui	ity interest(s) of the Secure	d Party auth	orizing this Continuation :	Statement is
ASSIGNMENT (full or partial) Give name of assignee in item	7a or 7b and address of assignee in it	em 7c. and also give name o	f assignor in	ıtem 9	
AMENDMENT (PARTY INFORMATION) This Amendment a		arty of record. Check only of			
Also check one of the following three boxes and provide appropriate		arry of redord. Orleon only s	ATO OF ITTEGE	the boxes	
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 a	m 6a or 6b lalso give new DEL	ETE name. Give record name deleted in item 6a or 6b.		DD name Complete item em 7c, also complete item:	
CURRENT RECORD INFORMATION.	duress crizinge) in item 70	deleted in item da or op.	110	att 70, also complete item.	a ru-ry (ii appilos
6a ORGANIZATION'S NAME					
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DE INDIVIDUALS LAST NAME	FIRST NAME		MIDOLE	NAME	SUFFIX
66 INDIVIDUAL'S LAST NAME HARRIS	FIRST NAME		MIDOLE	NAME	SUFFIX
HARRIS CHANGED (NEW) OR ADDED INFORMATION:			MIDOLE	NAME	SUFFIX
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HARRIS CHANGED (NEW) OR ADDED INFORMATION: 7a ORGANIZATION'S NAME 7b INDIVIDUAL'S LAST NAME MAILING ADDRESS	AUDREY FIRST NAME		MIDDLE	NAME	SUFFIX
HARRIS CHANGED (NEW) OR ADDED INFORMATION: 7a ORGANIZATION'S NAME 7b INDIVIDUAL'S LAST NAME MAILING ADDRESS	FIRST NAME CITY PELHAM	FORGANIZATION	MIDDLE STATE AL	NAME POSTAL CODE	SUFFIX
HARRIS CHANGED (NEW) OR ADDED INFORMATION: 7a ORGANIZATION'S NAME 7b INDIVIDUAL'S LAST NAME MAILING ADDRESS 19 RED STICK RD ADD'L INFO RE 7e TYPE OF ORGA ORGANIZATION DEBTOR	FIRST NAME CITY PELHAM INIZATION 71 JURISDICTION C	FORGANIZATION	MIDDLE STATE AL	NAME POSTAL CODE 35124	SUFFIX
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