UCC FINANCING STATEMENT AMENDME	ENT			
FOLLOW INSTRUCTIONS		_		
A. NAME & PHONE OF CONTACT AT FILER (optional)				
Julie Burnett 205-444-3792		1		
B. E-MAIL CONTACT AT FILER (optional) jburnett@avadiancu.com		4/5/55/5/5/5/5/5/5/5/5/5/5/5/5/5/5/5/5/		
C SEND ACKNOWLEDGMENT TO: (Name and Address)	<u>.</u>			
<u> </u>	. D			
Avadian Credit Union ATTN Business Lending P.O. Box 360287	g Dept.	Shelby Cnty	Judge of Probate, AL	
Birmingham, AL 35236		07/13/2017	10:31:48 AM FILED/CERT	
Dit innightun, 7th 50200				
			PACE IS FOR FILING OFFICE USE	•
1a. INITIAL FINANCING STATEMENT FILE NUMBER 12-0424959		(or recorded) in the RI	TEMENT AMENDMENT is to be filed (for EAL ESTATE RECORDS	record;
	Labarra ra tarminatad ii		Addendum (Form UCC3Ad) <u>and provide Debto</u>	
 TERMINATION: Effectiveness of the Financing Statement identified Statement 	i above is terminated v	with respect to the security int	erest(s) or secured Farty authorizing this	Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7a For partial assignment, complete items 7 and 9 and also indicate affective.			ne of Assignor in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identification	<u> </u>		Secured Party authorizing this Continuation	on Statement is
continued for the additional period provided by applicable law		_ 		
5 PARTY INFORMATION CHANGE: AND Che	ck <u>one</u> of these three b	oxes to:		
Check one or these two soxes.	CHANGE name and/or a item 6a or 6b; and item	address: CompleteADD	name: Complete item DELETE name: 7b, <u>and</u> item 7c to be deleted in i	Give record name tem 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information				
6a. ORGANIZATION'S NAME			<u> </u>	
6b. INDIVIDUAL'S SURNAME	FIRST PERSON	NAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Wise	Julius		F	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party In Trail ORGANIZATION'S NAME	nformation Change - provide	only <u>one</u> name (7a or 7b) (use exact, f	ull name, do not omit, modify, or abbreviate any part o	f the Debtor's name)
OR	_			
7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME		- -		<u></u>
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			_	SUFFIX
HADISTOOME O VARIO INVINCE INVINCE (2)/HALLIME(2)				1901117
7c. MAILING ADDRESS	CITY	<u> </u>	STATE POSTAL CODE	COUNTRY
	CITY		STATE POSTAL CODE	
	CITY ADD collateral	DELETE collateral		COUNTRY
7c. MAILING ADDRESS		DELETE collateral		COUNTRY
7c. MAILING ADDRESS 8 COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral		COUNTRY
7c. MAILING ADDRESS 8 COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral		COUNTRY
7c. MAILING ADDRESS 8 COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral		COUNTRY
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7c. MAILING ADDRESS 8 COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral		COUNTRY
7c. MAILING ADDRESS 8 COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral		RESTATE covered collateral	COUNTRY ASSIGN collaterate
7c. MAILING ADDRESS 8 ☐ COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral. 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here	ADD collateral	Provide only <u>one</u> name (9a or 9	RESTATE covered collateral	COUNTRY ASSIGN collaterate
7c. MAILING ADDRESS 8 COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral. 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and program of the pr	ADD collateral HIS AMENDMENT: Tovide name of authorizing	Provide only <u>one</u> name (9a or 9 ng Debtor	RESTATE covered collateral	COUNTRY ASSIGN collaterate
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and property of the second authorized by a DEBTOR. 9a. ORGANIZATION'S NAME Alabama Telco Credit Union AKA Ava	ADD collateral HIS AMENDMENT: ovide name of authorizing dian Credit	Provide only <u>one</u> name (9a or 9 ng Debtor U nion	RESTATE covered collateral	ASSIGN collateral
7c. MAILING ADDRESS 8 COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral. 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE If this is an Amendment authorized by a DEBTOR, check here and propared on the propagation of these four boxes: 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE Indicate collateral.	ADD collateral HIS AMENDMENT: Tovide name of authorizing	Provide only <u>one</u> name (9a or 9 ng Debtor U nion	RESTATE covered collateral	COUNTRY ASSIGN collateral
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