## UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)  Corporation Service Company 1-800-858-5	5294
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	
1339 18834	
Corporation Service Company 801 Adlai Stevenson Drive	
Springfield, IL 62703	Filed In: Alabama
	(Shelby)
1a. INITIAL FINANCING STATEMENT FILE NUMBER	

Corporation Service Company 1-800-858-5	294						
B. E-MAIL CONTACT AT FILER (optional)	· · ·			20170719000258080			
SPRFiling@cscinfo.com			20170719000258080 07/19/2017 11:59:44 AM				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				11:59:44 AN	1		
1339 18834			CC6 1/1				
Corporation Service Company							
801 Adlai Stevenson Drive Springfield, IL 62703							
	Filed In: Alabam (Shelb						
	_		SPACE IS FO	R FILING OFFICE US	E ONLY		
1a. INITIAL FINANCING STATEMENT FILE NUMBER				ENDMENT is to be filed [f			
20140828000271240 08/28/2014		•		RECORDS rm UCC3Ad) <u>and</u> provide De			
2. TERMINATION: Effectiveness of the Financing Statement identi Statement	fied above is termina	ated with respect to the security	interest(s) of Sec	cured Party authorizing th	nis Termination		
3. ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate a			ame of Assignor	in item 9			
4. CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law	ntified above with re	spect to the security interest(s)	of Secured Party	authorizing this Continua	ation Statement is		
5. PARTY INFORMATION CHANGE:							
Check <u>one</u> of these two boxes:	CHANGE name or		D name: Comple	te item DELETE nom	e: Give record name		
This Change affects Debtor or Secured Party of record	item 6a or 6b; <u>and</u>	nd/or address: Complete item 7a or 7b <u>and</u> item 7c7a	or 7b, <u>and</u> item 7	to be deleted	in item 6a or 6b		
6. CURRENT RECORD INFORMATION: Complete for Party Information. ORGANIZATION'S NAME	tion Change - provide	only <u>one</u> name (6a or 6b)					
oa. ORGANIZATION S NAIVIE							
OR 6b. INDIVIDUAL'S SURNAME	FIRST PE	RSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
Braden	Danie		W.				
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Pa	rty Information Change - p	rovide only <u>one</u> name (7a or 7b) (use exac	ct, full name; do not or	nit, modify, or abbreviate any pa	rt of the Debtor's name)		
7a. ORGANIZATION'S NAME							
OR							
7b. INDIVIDUAL'S SURNAME							
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDORE OF IROTT ERROUNAL TAXINE							
INDIVIDUAL'S ADDITIONAL NAME(\$)/INITIAL(\$)					SUFFIX		
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY		
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE c	overed collateral	ASSIGN collateral		
Indicate collateral:	Filed and Recor	ded					
	Official Public I						
	Judge James W. County Clerk	Fuhrmeister, Probate Judge,					
	Shelby County,						
	07/19/2017 11:59 \$.00 CHERRY	7:44 ANI		<b>7</b> ~_			
A BANKS	20170719000258	080	June 1				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and	THIS AMENDMEN provide name of auti	,	r 9b) (name of As	signor, if this is an Assign	ment)		
9a. ORGANIZATION'S NAME Servis First Bank		<u> </u>					
9b. INDIVIDUAL'S SURNAME	FIRST PE	RSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		

10. OPTIONAL FILER REFERENCE DATA: Billing Ref 2 Debtor: Daniel W. Braden - 22396

1339 18834