#					
OLLOW INSTRUCTIONS  . NAME & PHONE OF CONTACT AT FILER (optional)					
FAYE SMITH 334-564-1962			\$ <b>2</b>		
E-MAIL CONTACT AT FILER (optional)					
. SEND ACKNOWLEDGMENT TO: (Name and Address)		2017(	07200002605	60 1/1 \$.00	
FIRST US BANK FKA FIRST UNITED SECURITY BANK 131 WEST FRONT STREET		97/20	9/2017 03:1	ge of Probate, AL 3:50 PM FILED/CER	
PO BOX 249					
THOMASVILLE, AL 36784	1				
			÷	R FILING OFFICE USE	
INITIAL FINANCING STATEMENT FILE NUMBER 0160629000226980		(or recorded) in the	REAL ESTATE R	NDMENT is to be filed [for its ECORDS on UCC3Ad] and provide Debto	
TERMINATION: Effectiveness of the Financing Statement identific	ed above is terminated w				
Statement					
ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate aff	ected collateral in item 8				
CONTINUATION: Effectiveness of the Financing Statement ident continued for the additional period provided by applicable law	tified above with respect	to the security interest(s) o	f Secured Party	authorizing this Continuation	n Statement is
PARTY INFORMATION CHANGE:					
Check one of these two boxes:	neck <u>one</u> of these three bo CHANGE name and/or a litem 6a or 6b; <u>and</u> item 7		D name: Complet or 7b, <u>and</u> item 7c	e item DELETE name:	
This Change affects Debtor or Secured Party of record  CURRENT RECORD INFORMATION: Complete for Party Information			OI /D, <u>Mily</u> Rein /L	, to be deleted it!	DIT OF OLOD
6a. ORGANIZATION'S NAME	<i>*</i>	-· . ·			
2	FIRST PERSON		ADDITION	IAL NAME(S)/INITIAL(S)	SUFFIX
` 6b. INDIVIDUAL'S SURNAME	FIRST PERSON.				
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	/ Information Change - provide o	nly <u>one</u> name (7a or 7b) (use exact	, full name; do not om	it, modify, or abbreviate any part of	the Debtor's name
7a. ORGANIZATION'S NAME					
		· · · · · · · · · · · · · · · · · · ·			
7b. INDIVIDUAL'S SURNAME					
7b. INDIVIDUAL'S SURNAME					
7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S FIRST PERSONAL NAME					SUFFIX
/b. INDIVIDUAL'S SURNAME					SUFFIX
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	CITY		STATE	POSTAL CCDE	SUFFIX
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS					COUNTRY
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes:	CITY ADD collateral	DELETE collateral			COUNTRY
INDIVIDUAL'S FIRST PERSONAL NAME		DELETE collateral			COUNTRY
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral			COUNTRY
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes:		DELETE collateral			COUNTRY
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INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:  NAME OF SECURED PARTY OF RECORD AUTHORIZING T	ADD collateral  HIS AMENDMENT: P	ovide only <u>one</u> name (9a or	RESTATE	overed collateral A	SSIGN collate
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:  NAME of SECURED PARTY of RECORD AUTHORIZING T if this is an Amendment authorized by a DEBTOR, check here and p	ADD collateral  HIS AMENDMENT: Perovide name of authorizing	rovide only <u>one</u> name (9a or g Debtor	RESTATE	overed collateral A	SSIGN collate
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:  NAME of SECURED PARTY of RECORD AUTHORIZING T if this is an Amendment authorized by a DEBTOR, check here and p 9a. ORGANIZATION'S NAME  FIRST UNITED SECURITY BANK N	ADD collateral  HIS AMENDMENT: Perovide name of authorizing	rovide only <u>one</u> name (9a or g Debtor	RESTATE of Ass	overed collateral Assignment	SSIGN collate
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  MAILING ADDRESS  COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:  NAME of SECURED PARTY of RECORD AUTHORIZING T if this is an Amendment authorized by a DEBTOR, check here and p	ADD collateral  HIS AMENDMENT: Perovide name of authorizing	rovide only <u>one</u> name (9a or g Debtor	RESTATE of Ass	overed collateral A	SSIGN collate