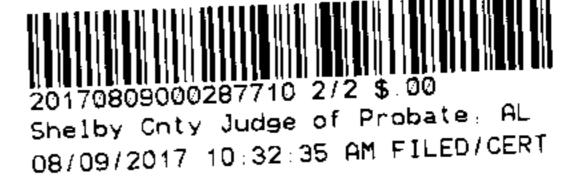


NAME & PHONE OF CONTACT AT FILER (optional)				
NAME & PHONE OF CONTACT AT FILER [optional] onya Tarbert 205-226-1403				
SEND ACKNOWLEDGMENT TO: (Name and Address)				
	_			
Alabama Power Company				
600 18th St N Birmingham, AL 35203				
Diffilligham, AL 33203	2017	0809000287710 1/2 \$.00		
	Shel	by Cnty Judge of Probate: AL		
	08/0	9/2017 10:32:35 AM FILED/CERT		
	THE	ABOVE SPACE IS FOR FILING OFFICE	JSE ONLY	
INITIAL FINANCING STATEMENT FILE #	210	1b. This FINANCING STATEM		
201207060002403	310	to be filed [for record] (or recorded) in the REAL ESTATE RECORDS		
★ TERMINATION: Effectiveness of the Financing Statement ident	ified above is terminated with respect to security int	erest(s) of the Secured Party authorizing this Term	ination Statement	
CONTINUATION: Effectiveness of the Financing Statement in	dentified above with respect to security interest(s)	of the Secured Party authorizing this Continuation	n Statement is	
continued for the additional period provided by applicable law		· · · · · · · · · · · · · · · · · · ·		
ASSIGNMENT (full or partial): Give name of assignee in item 7.				
AMENDMENT (PARTY INFORMATION): This Amendment afford		Check only one of these two boxes		
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate inf CHANGE name and/or address: Give current record name in item (we record name	m 7a or 7b	
name (if name change) in item 7a or 7b and/or new address (if add	ress change) in item 7c. to be deleted in item	· · · · · · · · · · · · · · · · · · ·	ms 7d-7g (if applie	
CURRENT RECORD INFORMATION: 6a ORGANIZATION'S NAME				
ON O				
6b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	Toursix	
MOBLEY	KENNETH	W	SUFFIX	
7a ORGANIZATION'S NAME 7b INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
MOBLEY	DARLENE			
MAILING ADDRESS 1850 7TH AVE	CALEDA	STATE POSTAL CODE	COUNTR	
TAX ID# SSN OR EIN ADD'LINFO RE 7e TYPE OF ORGANIZ	CALERA	AL 35040	US	
ORGANIZATION	ZATION 7f. JURISDICTION OF ORGANIZAT	ION 7g ORGANIZATIONAL ID #, if a	ny	
·		<u> </u>	\prod_{i}	
MENDMENT (COLLATERAL CHANGE): check only one box. escribe collateral deleted or added or give entire resta	ted collateral description, or describe collateral	assigned	·	
AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated and deleted or section added. Describe collateral deleted or added and deleted or give entire restated and deleted or added and deleted or give entire restated and deleted or give entire restated and deleted or added and deleted or give entire restated and deleted or added and deleted or give entire restated and give entire restated	THIS AMENDMENT (name of assignor, if this is	an Assignment) If this is an Amendment authorize		
AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated and deleted or section added. Or give entire deleted or added and deleted or give entire restated and deleted or added and deleted or give entire deleted. Or give entire deleted or give	THIS AMENDMENT (name of assignor, if this is	an Assignment) If this is an Amendment authorize		

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20120706000240310 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR 12b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

13. Use this space for additional information



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