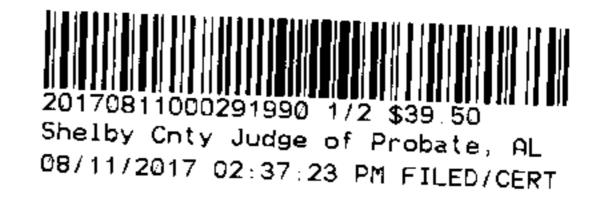
| 32.00 1.50 |
|---------------|
| 39.50 |



UCC FINANCING STATEMENT

Shelby County

FOLLOW INSTRUCTIONS

| A. NAME & PHONE OF CONTACT AT FILER (optional) Jacqueline Cox | | | | | |
|---|---|------------------------|-----------------------------|-------------------|--|
| B. E-MAIL CONTACT AT FILER (optional) | | | | | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | | | |
| | —¬ | | | | |
| ' Alabama Gas Corporation | ' | | | | |
| 2101 6th Avenue North | | | | | |
| Birmingham, AL 35203 | | | | | |
| <u> </u> | THE AB | OVE SPACE IS FO | R FILING OFFICE USE | ONLY | |
| | act, full name, do not omit, modify, or abbreviate provide the individual Debtor information in item | | | | |
| 1a. ORGANIZATION'S NAME | | | | | |
| 1b INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | | | NITIAL(S) SUFFIX | |
| WILLIAM | SALEEM | | Tecori, 2005 | | |
| 134 STONE HILL CIRCLE | PELHAM | STATE | 35124 | US | |
| 2. DEBTOR'S NAME Provide only one Debtor name (2a or 2b) (use exa | | | | | |
| | provide the Individual Debtor information in item | | | | |
| 2a. ORGANIZATION'S NAME | · | | · | | |
| OR | | | | | |
| 2b INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX | |
| 2c MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY | |
| | | | | | |
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR | R SECURED PARTY) Provide only one Secure | d Party name (3a or 3b | ·) | | |
| 3a. ORGANIZATION'S NAME | | | | | |
| Alabama Gas Corporation | Telegat pengantili kining | | | Taureny | |
| 36 INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX | |
| 3c MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY | |
| 2101 6th Avenue North | Birmingham | AL | 35203 | US | |
| 4 COLLATERAL: This financing statement covers the following collateral | | | • | | |
| TRANE SYSTEM | | | | | |
| IKANEGIGIEM | | | | | |
| M# 4TTR4036L1000A S# 17181UAA3F | | | | | |
| M# TUE1B080A9361A S# 161543YU1G | | | | | |
| M# 4PXCBU36BS3HAA | | | | | |
| | | | | | |
| | | | | | |
| \$5000.00 | | | | | |
| | | | | | |
| | | | | | |
| | | | | Ė | |
| 5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a | a Trust (see UCC1Ad, item 17 and Instructions) | being administe | red by a Decedent's Person | al Representative | |
| 6a. Check only if applicable and check only one box | | 6b. Check <u>only</u> | f applicable and check only | one box | |
| Public-Finance Transaction Manufactured-Home Transaction | ion A Debtor is a Transmitting Utility | Agncul | tural Lien Non-UCC | Filing | |
| 7. ALTERNATIVE DESIGNATION (if applicable). Lessee/Lessor | Consignee/Consignor Seller | /Buyer 🔲 Ba | ilee/Bailor Lice | nsee/Licensor | |

8. OPTIONAL FILER REFERENCE DATA:



Shelby Cnty Judge of Probate, AL 08/11/2017 02:37:23 PM FILED/CERT

UCC FINANCING STATEMENT ADDENDUM

| | if line 1b was left blank | | | |
|---|--|-------------------------------|------------------------------|---------------------|
| 9a ORGANIZATION'S NAME | | | | |
| | | | | |
| 96 INDIVIDUAL'S SURNAME WILLIAM | • · · · · · · · · · · · · · · · · · · · | | | |
| FIRST PERSONAL NAME | | | | |
| SALEEM ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | | | |
| | | HE ABOVE SPACE | IS FOR FILING OFFI | CE USE ONLY |
| DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name | | or 2b of the Financing S | Statement (Form UCC1) (| use exact, full na |
| do not omit, modify, or abbreviate any part of the Debtor's name) and enter the 10a ORGANIZATION'S NAME | maning address in line roc | ···· ——— | | |
| D | | | | |
| R 10b INDIVIDUAL'S SURNAME | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | <u></u> | | | • |
| | | | | Tourse |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | | | | SUFFIX |
| c MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTR |
| ADDITIONAL SECURED PARTY'S NAME or ASSIGN | NOR SECURED PARTY'S NAM | ME: Provide only <u>one</u> n | i ame (11a or 11b) | |
| 11a ORGANIZATION'S NAME VALLEY DISTRUBUTORS, INC | | | | |
| 11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIO | NAL NAME(S)/INITIAL(S | SUFFIX |
| | | | | |
| 3061 LEE ST | PELHAM | STATE | POSTAL CODE 35124 | COUNTRY |
| 2. ADDITIONAL SPACE FOR ITEM 4 (Collateral) | IELHAM | AL | 33124 | 0.5 |
| | | | | |
| | | | | |
| This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. (if applicable) | | | | |
| This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in item 16 | e 14. This FINANCING STATEMENT: covers timber to be cut 16. Description of real estate | covers as-extracted | collateral Z is filed | as a fixture filing |
| REAL ESTATE RECORDS (if applicable) | covers timber to be cut | covers as-extracted | collateral Is filed | as a fixture filing |