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| 1 16 | CC FINANCING STATEMENT | | | | | |
| | LLOWINSTRUCTIONS And LINE | Court st | | | | |
| | NAME & PHONE OF CONTACT AT FILER (optional) | 11 | | | | |
| σ. | Jacqueline Cox | <i>V</i> | | | | |
| В. | E-MAIL CONTACT AT FILER (optional) | | | | | |
| | | | | | | |
| Ç. | SEND ACKNOWLEDGMENT TO: (Name and Address) | | | | | |
| l | | —, I | 2017081400 02 92 | | | |
| | Alabama Cas Camanatian | 1 | Shelby Cnty Ju | | - · | |
| | Alabama Gas Corporation 2101 6th Avenue North | | 08/14/2017 10: | 47:04 | AM FILED/CERT | |
| | Birmingham, AL 35203 | | | | | |
| l | Diffillingitant, AL 33203 | 1 | | | | |
| | |] | THE ABOVE SPA | CE IS FO | R FILING OFFICE USE C | ONLY |
| 1. [| DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full r | name, do not omit, r | modify, or abbreviate any part of | the Debtor | 's name), if any part of the inc | dividual Debtor's |
| | | | r information in item 10 of the Fi | | | |
| | 1a ORGANIZATION'S NAME | | | | | |
| OR | | | | | | |
| ÜK | 16. INDIVIDUAL'S SURNAME | FIRST PERSONAL | LNAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| | FREELS | JEFF | | L | | |
| | MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| l | 119 MACQUEEN CIRCLE | HELENA | \ | AL | 35080 | US |
| | DEBTOR'S NAME Provide only one Debtor name (2a or 2b) (use exact, full r | | - | | - | |
| | name will not fit in line 2b. leave all of item 2 blank, check here and provide t | he Individual Debto | r information in item 10 of the Fi | nancing St | atement Addendum (Form UC | C1Ad) |
| | 2a ORGANIZATION'S NAME | | | | <u></u> | |
| 00 | | | | | | |
| OR | 26 INDIVIDUAL'S SURNAME | FIRST PERSONA | LNAME | 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 SECU | RED PARTY) Prov | ride only <u>one</u> Secured Party nam | ne (3a or 3b | o) | |
| | 3a. ORGANIZATION'S NAME | | | | | |
| OR | Alabama Gas Corporation | | | | | |
| UN | 3b INDIVIDUAL'S SURNAME | FIRST PERSONA | LNAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| | <u> </u> | | | | T====:::::aa=== | |
| | MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| Z | 101 6th Avenue North | Birmingh | am | AL | 35203 | US |
| 4. (| COLLATERAL: This financing statement covers the following collateral: | | | | | |
| | | | | | | |
| R | HEEM 3.5 TON GAS SYSTEM | | | | | |
| _ | | | | | | |
| | 1# RHM-RA1442BJ1NA S# W071723788 | | | | | |
| N | I# RHM-RCF4821STAMCA S# W111716715 | | | | | |
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| e. | 2800.00 | | | | | |
| | 2000.00 | | | | | |
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| | | | | | | |
| 5. (| Check <u>only</u> if applicable and check <u>only</u> one box. Collateral is held in a Trust (| (see UCC1Ad, item | 17 and Instructions) bein | g administe | ered by a Decedent's Persona | I Representative |
| 6a. | Check <u>only</u> if applicable and check <u>only</u> one box | | 6b. (| Check <u>only</u> | if applicable and check <u>only</u> o | one box |
| | Public-Finance Transaction Manufactured-Home Transaction | A Debtor is a | Transmitting Utility | Agricu | Itural Lien Non-UCC | Filing |
| 7 , | ALTERNATIVE DESIGNATION (if applicable). Lessee/Lessor | Consignee/Consign | or Seller/Buyer | Ba | nilee/Bailor Licen | see/Licensor |
| 8. (| OPTIONAL FILER REFERENCE DATA: | | | | | |
| | | | | | | |
| | | | International Ass | ociation o | of Commercial Adminis | trators (IACA) |

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

| | a. ORGANIZATION'S NAME | | | | | | | |
|---|---|--|------------------------------------|---|-----------------------------------|---------------|--|--|
| | | | | | | | | |
| ج 95 | INDIVIDUAL'S SURNAME | | | | | | | |
| F | FREELS | | | 20170814000292880 2/2 \$35.20 | | | | |
| | FIRST PERSONAL NAME | | | 20170814000292880 2/2 300:20 20170814000292880 2/2 300:20 Shelby Cnty Judge of Probate: AL Shelby Cnty Judge of Probate: AL 08/14/2017 10:47:04 AM FILED/CERT | | | | |
| J | EFF | 08/1 | 472017 | | | | | |
| | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX | | | | | | |
| <u> 1</u> | | | THE ABOVE | SPACE | S FOR FILING OFFICE | USE ONL | | |
| | EBTOR'S NAME Provide (10a or 10b) only one additional Debtor name or | | line 1b or 2b of the F | inancing S | statement (Form UCC1) (use | exact, full n | | |
| do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c | | | | | | | | |
| 10 | a. ORGANIZATION'S NAME | | | | | | | |
| 10 | DE INDIVIDUAL'S SURNAME | | · | | | | | |
| INDIVIDUAL'S FIRST PERSONAL NAME | | | | | | | | |
| | INDIVIDUAL S ADDITIONAL NAME(S)/INITIAL(S) | | | | · · · · · · · · · · · · · · · · · | SUFFIX | | |
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| c M | AILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTR | | |
| | | | | | | | | |
| 11a. ORGANIZATION'S NAME TRINITY CONTRACTORS | | | | | | | | |
| 11 | b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX | | |
| | AILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTR | | |
| · Z 1 | | | | | 35173 | US | | |
| | SIMMONS DR DITIONAL SPACE FOR ITEM 4 (Collateral) | TRUSSVILLE | | AL | | <u> </u> | | |
| | | IKUSSVILLE | | AL | | | | |
| . AD | This FINANCING STATEMENT is to be filed (for record) (or recorded) in the | 14. This FINANCING STATE | MENT | AL | | | | |
| . AD | DITIONAL SPACE FOR ITEM 4 (Collateral) | | | | collateral is filed as a | | | |
| . AZ | This FINANCING STATEMENT is to be filed (for record) (or recorded) in the | 14. This FINANCING STATE covers timber to be of 16. Description of real estate | aut covers as- | | collateral s filed as a | | | |
| . AD | This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) me and address of a RECORD OWNER of real estate described in item 16 | 14. This FINANCING STATE | CIRCLE | | collateral s filed as a | | | |
| . AD | This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) me and address of a RECORD OWNER of real estate described in item 16 | 14. This FINANCING STATES covers timber to be of the control of real estate of the control of t | CIRCLE | | collateral is filed as a | | | |
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| 2. AD | This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) me and address of a RECORD OWNER of real estate described in item 16 | 14. This FINANCING STATES covers timber to be of 16. Description of real estate 1119 MACQUEEN HELENA, AL 35 Legal Description Lot 26 Block MAP BOOK: 16 | PAGE 114 | extracted | | | | |
| AD | This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) me and address of a RECORD OWNER of real estate described in item 16 | 14. This FINANCING STATE covers timber to be of the covers timber timber to be of the covers timber timber to be of the covers timber timbe | PAGE 114 | extracted | | | | |
| . AZ | This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS (if applicable) me and address of a RECORD OWNER of real estate described in item 16 | 14. This FINANCING STATES covers timber to be of 16. Description of real estate 1119 MACQUEEN HELENA, AL 35 Legal Description Lot 26 Block MAP BOOK: 16 | PAGE 114 LDSTONE PAGE 4 003 038.00 | extracted | | | | |