32. 63 44. 95 WCC FINANCING STATEMENT 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	201708140002928 Shelby Cnty Jud 08/14/2017 10:4		
UCC FINANCING STATEMENT 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	201708140002928 Shelby Cnty Jud		
JCC FINANCING STATEMENT OLLOW 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	201708140002928 Shelby Cnty Jud		
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	201708140002928 Shelby Cnty Jud		
A NAME & PHONE OF CONTACT AT FILER (optional) Jacqueline Cox E. E-MAIL CONTACT AT FILER (optional) SEND ACKNOWLEDGMENT TO: (Name and Address) Alabama Gas Corporation 2101 6th Avenue North	201708140002928 Shelby Cnty Jud		
NAME & PHONE OF CONTACT AT FILER (optional) Jacqueline Cox E-MAIL CONTACT AT FILER (optional) SEND ACKNOWLEDGMENT TO: (Name and Address) Alabama Gas Corporation 2101 6th Avenue North	201708140002928 Shelby Cnty Jud		
Jacqueline Cox E-MAIL CONTACT AT FILER (optional) SEND ACKNOWLEDGMENT TO: (Name and Address) Alabama Gas Corporation 2101 6th Avenue North	201708140002928 Shelby Cnty Jud		
E-MAIL CONTACT AT FILER (optional) SEND ACKNOWLEDGMENT TO: (Name and Address) Alabama Gas Corporation 2101 6th Avenue North	201708140002928 Shelby Cnty Jud		
Alabama Gas Corporation 2101 6th Avenue North	201708140002928 Shelby Cnty Jud		
Alabama Gas Corporation 2101 6th Avenue North	201708140002928 Shelby Cnty Jud		
2101 6th Avenue North	Shelby Cnty Jud		III
2101 6th Avenue North	Shelby Cnty Jud		
Birmingham, AL 35203	08/14/2017 10:4	390 1/2 \$36.95	it e
	, , -, 201/ TU:4	196 of Probate: AL 17:05 AM FILED/CERT	-
	THE ABOVE SPACE IS FO		
DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or name will not fit in line 1b. leave all of item 1 blank, check here. and provide the Individual Debtor information			
1a ORGANIZATION'S NAME			
TA GROANIZATION O NAME			
16 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
GILLETT ANN			
MAILING ADDRESS CITY	STATE	POSTAL CODE	COUNTRY
908 6TH STREET SOUTH BIRMINGHA	M AL	35205	US
26 INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS CITY	STATE	POSTAL CODE	COUNTRY
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY) Provide only	one Secured Party name (3a or 3	b)	'
3a ORGANIZATION'S NAME A laborra Cas Corporation			
Alabama Gas Corporation Station Individual's Surname First Personal Name	ADDITIC		
130 MIDIVIDUAL 3 SORMANIE	12001110	MAL NAME/SVINITIAL/SV	SUFFIX
1		NAL NAME(S)/INITIAL(S)	SUFFIX
MAILING ADDRESS CITY	STATE	POSTAL CODE	SUFFIX

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

	9a. ORGANIZATION'S NAME							
		<u></u>		. 1(1) 611 1		1 B (6 B)1		
R	96 INDIVIDUAL'S SURNAME							
	GILLETT			20170814000292890 2/2 \$36.95 Shelby Cnty Judge of Probate, AL				
	FIRST PERSONAL NAME ANN			2017 10	:47:05 AM FILED/	CERT		
İ	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX						
	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY DEBTOR'S NAME Provide (*0a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name or perform of the provide and part of the Debtor's name) and enter the mailing address in line 10c.							
r	do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a ORGANIZATION'S NAME							
₹	106 INDIVIDUAL'S SURNAME							
	INDIVIDUAL'S FIRST PERSONAL NAME							
	INDIVIDUAL S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX		
<u></u>	MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNT		
_				<u> </u>	<u> </u>			
. [11a ORGANIZATION'S NAME	OR SECURED PARTY	- Taylar - Taylar	<u>QIIC</u> III	and (112 or 110)			
₹	WESTERN SALES & SERVICE 11b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME			ADDITIONAL NAME(S)/INITIAL(S)			
					Incort, cope	- COLULTS		
	MAILING ADDRESS 533 WARRIOR RD	BIRMINGHA!	M	STATE	POSTAL CODE	US		
	ADDITIONAL SPACE FOR ITEM 4 (Collateral)			1 2	1.			
i .	✓ This FINANCING STATEMENT is to be fited [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)		[]					
j. N	REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real estate described in item 16	14 This FINANCING STATE covers timber to be 16. Description of real estate	cut covers as	s-extracted	collateral 7 is filed a	s a fixture filing		
. 1	REAL ESTATE RECORDS (if applicable)	covers timber to be	cut Covers as	s-extracted	collateral	s a fixture filing		