| 33.00 | | | | | |
|---|--|--|--------------------------------------|--|--------------------------|
| \$4520 | | | | | |
| CC FINANCING STATEMENT Shelby | | | | | |
| NAME & PHONE OF CONTACT AT FILER (optional) DANELLE KING 205-326-8299 | | | | | |
| E-MAIL CONTACT AT FILER (optional) | | | | | |
| SEND ACKNOWLEDGMENT TO: (Name and Address) | | | | | |
| ALABAMA GAS CORPORATION | | | | | |
| 6TH AVENUE NORTH | | 20170814000293010 Shelby Cnty Judge | of Pr | obate, AL | |
| BIRMINGHAM, AL 35203 | | 08/14/2017 10:47: | | | ONI V |
| DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact. | | odify, or abbreviate any part of th | ne Debtor | | dividual Debto |
| name will not fit in line 1b, leave all of item 1 blank, check here and provide all ORGANIZATION'S NAME | ide the Individual Debtor | information in item 10 of the Fina | ancing Su | atement Addendum (Form Ot | |
| R 15. INDIVIDUAL'S SURNAME | FIRST PERSONAL | NAME | ADDITIONAL NAME(S)/INITIAL(S) | | SUFFIX |
| : MAILING ADDRESS | CITY | <u></u> | STATE | POSTAL CODE | COUNTRY |
| | | | | | |
| DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, name will not fit in line 2b, leave all of item 2 blank, check here and prov | full name; do not omit, mi vide the Individual Debtor | odify, or abbreviate any part of the information in item 10 of the Fina | ie Debtor ancing St | 's name); if any part of the In atement Addendum (Form U0 | dividual Debto CC1Ad) |
| 2a ORGANIZATION'S NAME | | | | | |
| 2b. INDIVIDUAL'S SURNAME SHIRLEY | FIRST PERSONAL NAME BRIAN | | ADDITIONAL NAME(S)/INITIAL(S) KEITH | | SUFFIX |
| c MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| 106 CEDAR BEND DR SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S | HELENA | de only one Secured Party name | AL (3a or 3t | 35080 | US |
| 3a. ORGANIZATION'S NAME ALABAMA GAS CORPORATION | | | | | |
| R 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL | NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| c. MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| 2101 6TH AVENUE NORTH | BIRMING | SHAM | AL | 35203 | US |
| . COLLATERAL: This financing statement covers the following collateral | | | | | |
| TRANE COMPLETE SYSTEM | | | | | |
| M# 4TTR4036L1000AA S# 17224GTB3 M# 4PXCBU36BS3HAA S# 170220PA50 | | | | | |
| M# TUE1B060A936AF S# 17231S1B1C | | | | | |
| | | | | | |
| \$ 8724.00 | | | | | |
| | | | | | |
| | | | | | |
| . Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a T | Frust (see UCC1Ad, item 1 | | | ered by a Decedent's Person | |
| a. Check only if applicable and check only one box: | | [6b. Ch | ieck o <u>nly</u> | if applicable and check only | one box. |

Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility Agricultural Lien
7. ALTERNATIVE DESIGNATION (if applicable) Lessee/Lessor Consignee/Consignor Seller/Buyer Bailee/Bailor

8. OPTIONAL FILER REFERENCE DATA:

Non-UCC Filing

Licensee/Licensor

UCC FINANCING STATEMENT ADDENDUM **FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME **SHIRLEY** Shelby Cnty Judge of Probate, AL FIRST PERSONAL NAME 08/14/2017 10:47:17 AM FILED/CERT BRIAN SUFFIX ADDITIONAL NAME(S)/INITIAL(S) KEITH THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME. Provide (10a 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. 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 10b INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) COUNTRY POSTAL CODE STATE CITY 10c MAILING ADDRESS ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11. ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME ETHRIDGE HEATING AND AIR, INC ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME 11b INDIVIDUAL'S SURNAME COUNTRY POSTAL CODE STATE CITY 11c MAILING ADDRESS US 35022 6259 PARK SOUTH DR, STE 101 BESSEMER AL12. ADDITIONAL SPACE FOR ITEM 4 (Collateral) 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) Is filed as a fixture filing covers as-extracted collatera covers timber to be cut 15. Name and address of a RECORD OWNER of real estate described in item 16 Description of real estate. (if Debtor does not have a record interest): 106 Cedar Bend Dr Helena, AL 35080 **Legal Description:** Subdivision: Cedar Bend Phase 1 Block: 1 Lot: 13 Map Book: 17 Map Page: 139 Parcel# 13 8 27 2 001 001.015 Shelby County, Alabama

International Association of Commercial Administrators (IACA)

17. MISCELLANEOUS: