

UCC FINANCING	Sh	Shelby Cnty Judge of Probate, AL 08/15/2017 11:10:12 AM FILED/CERT					
	(front and back) CAREFULLY ONTACT AT FILER [optional]						
B SEND ACKNOWLEDGE	MENT TO: (Name and Address)		·····				
		•					
ALABA	MA GAS CORPORAT	ION					
2101 6TH AVE NORTH							
BIRMI	NGHA, AL 35203						
			THE ABOVE	SPACE IS FO	R FILING OFFICE US	E ONLY	
1a INITIAL FINANCING STATI 201404250001220					1b This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS		
2. ✓ TERMINATION: Effe	ctiveness of the Financing Statemen	t identified above is terminated wit	h respect to security interest(s) o	of the Secured Par	ty authorizing this Termina	tion Statement.	
	ffectiveness of the Financing Statem onal period provided by applicable to		to security interest(s) of the Se	cured Party auth	orizing this Continuation S	itatement is	
4. ASSIGNMENT (full or	partial): Give name of assignee in	item 7a or 7b and address of assig	nee in item 7c; and also give na	me of assignor in	item 9		
5 AMENDMENT (PARTY	INFORMATION): This Amendme	ent affects Debtor or So	cured Party of record. Check o	only one of these	two boxes		
	ng three boxes and provide appropri			•			
CHANGE name and/or a name (if name change) i	iddress. Give current record name in n item 7a or 7b and/or new address (item 6a or 6b, also give new (if address change) in item 7c.	DELETE name. Give record to be deleted in item 6a or 6		DD name Complete item 7 m 7c; also complete items		
6 CURRENT RECORD INF							
6a. ORGANIZATION'S NA	ME			· · · · · ·			
OR ES INDUADUALIS LAST					· • · · · · · · · · · · · · · · · · · ·		
DO. INDIVIDUAL S CAST NAME		FIRST NAMI	FIRST NAME		NAME	SUFFIX	
MASON		L	L		BOYD		
7. CHANGED (NEW) OR AD							
7a. ORGANIZATION'S NA	/MIC						
OR 76 INDIVIDUAL'S LAST I	JAME	FIRST NAM	FIRST NAME		MIDDLE NAME SUFFIX		
			, morrane		INDUCE NAME		
7c MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY	
2248 VANESSA DR			BIRMINGHAM		35242-4430	US	
ZZTO VARIESSA DIV	ADD'LINFO RE 7e TYPE OF OR		CTION OF ORGANIZATION	AL 7a ORG	ANIZATIONAL ID # if any		
	ORGANIZATION DEBTOR						
B AMENDMENT/COLLA	TERAL CHANGE): check only one	a hav				NON	
	eted or added, or give entire		or describe collateral Dassid	ined			
Describe conateraloele	ated ofadded_ by give entire		describe conditionassig	ji l e u			
9. NAME OF SECURED F	PARTY OF RECORD AUTHOR	IZING THIS AMENDMENT (n	ame of assignor, if this is an Assi	gnment) If this is	an Amendment authorized	d by a Debtor which	
	uthonzing Debtor or if this is a Term			_			
9a ORGANIZATION'S NA	ME						

ALABAMA GAS CORPORATION

9b. INDIVIDUAL'S LAST NAME MIDOLE NAME FIRST NAME SUFFIX 10, OPTIONAL FILER REFERENCE DATA