A. NAME & PHONE OF CONTACT AT FILER (optional)  Corporation Service Company 1-800-858-5294		20170815000295170 08/15/2017 11:38:07 AM			
. E-MAIL CONTACT AT FILER (optional)  SPRFiling@cscinfo.com	UCC1	1/3			
SEND ACKNOWLEDGMENT TO: (Name and Address)	ress)				
1349 68443					
Corporation Service Company 801 Adlai Stevenson Drive					
Springfield, IL 62703	Filed In: Alabama (Shelby)				
		OVE SPACE IS FO	OR FILING OFFICE USE	ONLY	
DEBTOR'S NAME: Provide only one Debtor name (1a o					
name will not fit in line 1b, leave all of item 1 blank, check her	ere and provide the Individual Debtor information in item	10 of the Financing St	tatement Addendum (Form U	CC1Ad)	
1a. ORGANIZATION'S NAME					
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIC	NAL NAME(\$)/INITIAL(\$)	SUFFIX	
Sims	Jonathan				
. MAILING ADDRESS 66 Chance Ln	CITY Pelham	STATE	POSTAL CODE 35124	COUNTRY	
	1 Olliani	AL			
name will not fit in line 2b, leave all of item 2 blank, check he			r's name); if any part of the li tatement Addendum (Form U		
2a. ORGANIZATION'S NAME		10 of the Financing St			
2a. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME	ere and provide the Individual Debtor information in item	10 of the Financing St	tatement Addendum (Form U	ICC1Ad)	
2a. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME  . MAILING ADDRESS	ere and provide the Individual Debtor information in item  FIRST PERSONAL NAME	ADDITIO	ONAL NAME(S)/INITIAL(S)  POSTAL CODE	SUFFIX	
2a. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME  . MAILING ADDRESS	FIRST PERSONAL NAME  CITY	ADDITIO	ONAL NAME(S)/INITIAL(S)  POSTAL CODE	SUFFIX	
2a. ORGANIZATION'S NAME  2b. INDIVIDUAL'S SURNAME  . MAILING ADDRESS  SECURED PARTY'S NAME (or NAME of ASSIGNEE	FIRST PERSONAL NAME  CITY	ADDITION STATE  d Party name (3a or 3)	ONAL NAME(S)/INITIAL(S)  POSTAL CODE	SUFFIX	

8. OPTIONAL FILER REFERENCE DATA:

1349 68443

## 20170815000295170 08/15/2017 11:38:07 AM UCC1 2/3

## UCC FINANCING STATEMENT ADDENDUM

. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing State because Individual Debtor name did not fit, check here	tement: if line 1h was left blank			
	itement, it line to was left blank			
9a. ORGANIZATION'S NAME				
R 9b. INDIVIDUAL'S SURNAME				
Sims				
FIRST PERSONAL NAME				
Jonathan				
ADDITIONAL NAME(\$)/INITIAL(\$)	SUFFIX			
		THE ABOVE SPA	ACE IS FOR FILING OFFIC	E USE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor do not omit, modify, or abbreviate any part of the Debtor's name) and en		line 1b or 2b of the Finan	cing Statement (Form UCC1) (ι	ise exact, full name
10a. ORGANIZATION'S NAME				
10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
c. MAILING ADDRESS	CITY	ST	ATE POSTAL CODE	COUNTRY
11a. ORGANIZATION'S NAME  11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	AD	DITIONAL NAME(S)/INITIAL(S	SUFFIX
c. MAILING ADDRESS	CITY	ST	ATE POSTAL CODE	COUNTRY
	CITY	\$T	ATE POSTAL CODE	COUNTRY
	CITY	ST	ATE POSTAL CODE	COUNTRY
. ADDITIONAL SPACE FOR ITEM 4 (Collateral):	ed) in the 14. This FINANCING STATE	MENT:		
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  3. In this FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable)	ed) in the 14. This FINANCING STATE	MENT:		s a fixture filing
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  3. In this FINANCING STATEMENT is to be filed [for record] (or recorded REAL ESTATE RECORDS (if applicable)  5. Name and address of a RECORD OWNER of real estate described in ite (if Debtor does not have a record interest):	ed) in the    14. This FINANCING STATE covers timber to be em 16    16. Description of real estate	MENT: cut covers as-extra		s a fixture filing
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):  3. This FINANCING STATEMENT is to be filed [for record] (or recorde REAL ESTATE RECORDS (if applicable)  5. Name and address of a RECORD OWNER of real estate described in ite (if Debtor does not have a record interest):  1420 Hwy 35	ed) in the 14. This FINANCING STATE covers timber to be em 16 16. Description of real estate Beginning at N Ln	MENT: cut covers as-extra	acted collateral  is filed a	s a fixture filing
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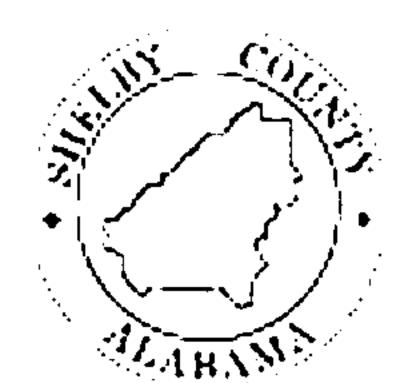
Corporation Service Company 2711 Centerville Rd, Ste. 400 Wilmington, DE 19808

## 20170815000295170 08/15/2017 11:38:07 AM UCC1 3/3

All of the Debtor's right, title and interest, now existing and hereafter arising, in and to all of the Equipment subject to that certain Lease No. 61297 between Debtor as Lessee and Microf, LLC as Lessor, (ii) all insurance, warranty, rental and other claims and rights to payment and chattel paper arising out of such Equipment, (iii) all books, records and proceeds relating to the foregoing, and (iv) any other property or rights to which the Lessee may be or become entitled by reason of Lessee's interest in the Equipment. For the purposes of this financing statement, "Equipment" shall be further described in item 16 of the UCC1Ad attached hereto, and includes all substitutions, replacements, upgrades, repairs, parts and attachments, improvements and accessions thereto. THIS FILING IS FOR PRECAUTIONARY AND INFORMATIONAL PURPOSES ONLY. THE PARTIES CONSIDER THIS TRANSACTION TO BE A TRUE LEASE. LESSEE HAS NO RIGHT TO SELL OR PLEDGE THE EQUIPMENT, IT IS OWNED BY LESSOR AND LEASED TO LESSEE.

MORTEX Evaporator Coil M# 96-854Y-0P S# M0630160068

CARRIER Heat Pump Condenser M# 214DNA036000 S# 2917E09230



Filed and Recorded
Official Public Records
Judge James W. Fuhrmeister, Probate Judge,
County Clerk
Shelby County, AL
08/15/2017 11:38:07 AM
\$56.65 DEBBIE

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