UCC FINANCING STATEMENT AMENDMENT Shelby Cnty Judge of Probate, AL 08/18/2017 01:39:38 PM FILED/CERT **FOLLOW INSTRUCTIONS** A. NAME & PHONE OF CONTACT AT FILER (optional) FAYE SMITH 334-564-1962 B. E-MAIL CONTACT AT FILER (optional) Firstusbank com C. SEND ACKNOWLEDGMENT TO: (Name and Address) TIRST US BANK FKA FIRST UNITED SECURITY BANK 131 WEST FRONT STREET **PO BOX 249** THOMASVILLE, AL 36784 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a, INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS 2014009000319710 Filed attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8 CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law PARTY INFORMATION CHANGE: AND Check one of these three boxes to: Check one of these two boxes: DELETE name: Give record name CHANGE name and/or address: Complete ADD name: Complete item This Change affects Debtor or Secured Party of record to be deleted in item 6a or 6b 7a or 7b, and item 7c item 6a or 6b; and item 7a or 7b and item 7c 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) COUNTRY POSTAL CODE STATE ΩŢΥ 7c. MAILING ADDRESS ASSIGN collateral DELETE collateral RESTATE covered collateral ADD collateral COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)

If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME

FIRST UNITED SECURITY BANK NKA FIRST US BANK

9b. INDIVIDUAL'S SURNAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10. OPTIONAL FILER REFERENCE DATA:

860003005--SB DEV. CORP--