UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS		20170818000301190 1/1 \$.00			
A. NAME & PHONE OF CONTACT AT FILER (optional) FAYE SMITH 334-564-1962		Shelby Cn	ty Judge of 7 01:39:47 P	•	
B. E-MAIL CONTACT AT FILER (optional) + らいいけんのよいかい しゅうれい しゅうい (Name and Address)					
FIRST US BANK FKA FIRST UNITED SECURITY BANK 131 WEST FRONT STREET PO BOX 249 THOMASVILLE, AL 36784		THE ABOV	E SPACE IS FOR	R FILING OFFICE US	SE ONLY
20150514000160210		1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS			
20130314000100210 2. TERMINATION: Effectiveness of the Financing Statement identific	ed above is terminated	·	•	n UCC3Ad) <u>and</u> provide Dured Party authorizing	
Statement 3. ASSIGNMENT (full or partial): Provide name of Assignee in item	7a or 7h and addess-	of Assigned in item 7s and	name of Accionos	n item 9	
For partial assignment, complete items 7 and 9 <u>and</u> also indicate aff			Trainie of Assignor		
 CONTINUATION: Effectiveness of the Financing Statement ident continued for the additional period provided by applicable law 	tified above with respe	ect to the security interest(s)	of Secured Party	authorizing this Continu	uation Statement is
Check one of these two boxes: This Change affects Debtor or Secured Party of record CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAME		n 7a or 7b <u>and</u> item 7c 7	NDD name: Complet a or 7b, <u>and</u> item 7c		ne: Give record name I in item 6a or 6b
6b. INDIVIDUAL'S SURNAME	FIRST PERSON		ADDITION	ITIONAL NAME(S)/INITIAL(S) SUFFIX	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party 7a. ORGANIZATION'S NAME	Information Change - provid	ie only <u>one</u> name (7a or 7b) (use exa	act, full name; do not om	t, modify, or abbreviate any p	art of the Debtor's name)
7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	<u> </u>				SUFFIX
	CITY	•	STATE	POSTAL CODE	COUNTRY
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	CITY ADD collateral	DELETE collateral		POSTAL CODE	COUNTRY
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 3. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING To lift this is an Amendment authorized by a DEBTOR, check here and p	ADD collateral	Provide only <u>one</u> name (9a c	RESTATE	vered collateral	COUNTRY ASS!GN collateral
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 3. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING T	ADD collateral HIS AMENDMENT: rovide name of authoric	Provide only <u>one</u> name (9a o	or 9b) (name of Ass	vered collateral	ASSIGN collateral