

NAME & PHONE OF CONTACT AT FILER [optional] Inya Tarbert 205-226-1403 SEND ACKNOWLEDGMENT TO: (Name and Address)			
			
Alabama Power Company			
600 18th St N			
Birmingham, AL 35203		20170824000308670	e of Probate, AL.
		20170824000308670 Shelby Cnty Judge 08/24/2017 10:39	:59 AM FILED/CERT
}			
		THE ABOVE SPACE IS FOR FII	LING OFFICE USE ONLY
NITIAL FINANCING STATEMENT FILE#		1b. This FINA	ANCING STATEMENT AMENDMEN
20130508000191630		REALES	d [for record] (or recorded) in the TATE RECORDS.
TERMINATION: Effectiveness of the Financing Statement identified above			
CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law.	above with respect to security in	terest(s) of the Secured Party authorizing	this Continuation Statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b as	nd address of assignee in item 7	c; and also give name of assignor in item (3 .
MENDMENT (PARTY INFORMATION): This Amendment affects	Debtor or Secured Party of	of record. Check only one of these two bo	oxes.
Iso check one of the following three boxes and provide appropriate information			
CHANGE name and/or address: Give current record name in item 6a or 6b; name (if name change) in item 7a or 7b and/or new address (if address char	also give new DELETE inge) in item 7c. to be dele	name: Give record name ADD nar sted in item 6a or 6b. item 7c;	me: Complete item 7a or 7b, and als also complete items 7d-7g (if applic
URRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
CLARK	TERRY	R.	
HANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	IMIDDLE NAME	ESUFFIX
TO. HADIVIDUME O EAST NAIME	LIKO! INVIAIE	INITODE MAINS	SUFFIX
AILING ADDRESS	CITY	STATE POS	STAL CODE COUNTR'
900 EBBERS RANCH RD	FORESTHILL		631 US
TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF OR	GANIZATION 7g. ORGANIZA	ATIONAL ID#, if any
ORGANIZATION DEBTOR			
MENDMENT (COLLATERAL CHANGE): check only one box.			
escribe collateraldeleted oradded, or give entirerestated colla	ateral description, or describe or	ollateral assigned.	
	A & & FT & & FT &	or, if this is an Assignment) If this is an Ar	nendment authorized by a Debtor wh
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AME OF SECURED PARTY OF RECORD AUTHORIZING THIS A lds collateral or adds the authorizing Debtor, or if this is a Termination authoriz			*
lds collateral or adds the authorizing Debtor, or if this is a Termination authorizes. ORGANIZATION'S NAME			*
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UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20130508000191630 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Alabama Power Company OR | Alabama Power Company | FIRST NAME | MIDDLE NAME, SUFFIX |

13. Use this space for additional information

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