UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS											
A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141											
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer											
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 26405 -	ANT		* #1 * * * * 1 * *	# 1 1 1 # # 1 # # 1 # 1 # 1 # 1 # 1 # 1							
CT Lien Solutions P.O. Box 29071		20170824 Shelby C	000309								
Glendale, CA 91209-9071 AL FI)	AL (TUR	E	08/24/20	17 02:1	28:42 PM FILED/CERT						
File with: Shelby, AL			THE ABOVE SPA	CE IS FO	OR FILING OFFICE USE	ONLY					
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20120824000318950 8/24/2012 CC AL Shelby			This FINANCING STATE! (or recorded) in the REAL	VENT AM ESTATE	ENDMENT is to be filed [for	record]					
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											
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a of For partial assignment, complete items 7 and 9 and also indicate affective.			in item 7c <u>and</u> name of As	ssignor in	item 9						
4. X CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	d above wit	h respect to the secu	rity interest(s) of Secured	Party auti	norizing this Continuation Sta	atement is					
5. PARTY INFORMATION CHANGE:		· · · · · · · · · · · · · · · · · · ·									
 Check one of these two boxes: <u>AND</u> Check <u>one</u> of these three boxes to:											
		name and/or address: 6b; <u>and</u> item 7a or 7b <u>a</u>		and item 7	c to be deleted in ite						
6. CURRENT RECORD INFORMATION: Complete for Party Information Ch 6a. ORGANIZATION'S NAME	nange - pro	vide only <u>one</u> name (6a or 6b)	······································							
Lay Bay LLC											
OR 6b. INDIVIDUAL'S SURNAME		RST PERSONAL NAME	NAL NAME		ADDITIONAL NAME(S)/INITIAL(S)						
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform	nation Change	- provide only one name	(7a or 7b) (use exact, full name;	do not omit, r	nodify, or abbreviate any part of the [Debtor's name)					
7a. ORGANIZATION'S NAME	. ,										
OR 76. INDIVIDUAL'S SURNAME				·							
INDIVIDUAL'S FIRST PERSONAL NAME	· · · · · · · · · · · · · · · · · · ·					-					
INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S)	······································		**************************************	•		SUFFIX					
7c. MAILING ADDRESS	C	ΤΥ		STATE	POSTAL CODE	COUNTRY					
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD ∞	Natoral DEI	ETE collateral R	ESTATE	covered collateral AS	SSIGN collatera					
Indicate collateral:		Haterat L DEL	.ETE COnateral R	ESIAIE	covered conateral A	SSIGIN COllatera					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE		MENT: Provide on e of authorizing Debto		me of Ass	ignor, if this is an Assignmen	t)					
9a. ORGANIZATION'S NAME	. UTINU HOH	Land Politing Double	······································	V		<u> </u>					
Renasant Bank											
OR 9b. INDIVIDUAL'S SURNAME	FI	RST PERSONAL NAME		ADDITION	NAL NAME(S)INITIAL(S)	SUFFIX					

2010001051-3

10. OPTIONAL FILER REFERENCE DATA: Debtor Name: Lay Bay LLC

60316170

2032

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOL	LOW INSTRUCTIONS					
	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amend					
	20824000318950 8/24/2012 CC AL Shelby					
72. r	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Am 12a. ORGANIZATION'S NAME					
	Renasant Bank					
OR						
	12b. INDIVIDUAL'S SURNAME					
	FIRST PERSONAL NAME	20170824000309450 2/2 \$32.00				
		Shelby Cnty Judge of Probate, AL 08/24/2017 02:28:42 PM FILED/CERT				
	ADDITIONAL NAME(S)INITIAL(S)	·····	SUFFIX			
				THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY		
	Name of DEBTOR on related financing statement (Name of a current Debtor of one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or ab	•		•	4.	13): Provide only
ſ	13a. ORGANIZATION'S NAME					*****
	Lay Bay LLC					
OR	13b. INDIVIDUAL'S SURNAME	FIRST PERS	ONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	ADDITIONAL SPACE FOR ITEM 8 (Collateral): tor Name and Address:					
	Bay LLC - NA , NA,					
0						
	ured Party Name and Address: asant Bank - P O Box 709 , Tupelo, MS 38802					
15.	This FINANCING STATEMENT AMENDMENT:		·	on of real estate:		
16.1	covers timber to be cut covers as-extracted collateral is filed as lame and address of a RECORD OWNER of real estate described in item 17	s a fixture filir	<u>ng</u>			
	f Debtor does not have a record interest):					
-						
18.1	VISCELLANEOUS: 60316170-AL-117 26405 - RENASANT BANK Renasa	nt Bank		File with: Shelby, AL	2032 2010001051-3	