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UCC FINANCING STATEMENT

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@wolte | erskluwer.com |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | 26405 - RENASANT |
| CT Lien Solutions P.O. Box 29071 | 60318493 |
| Glendale, CA 91209-9071 | ALAL |
| | FIXTURE |
| File with: Shelby Al | |

20170825000310210 1/2 \$32.00 Shelby Cnty Judge of Probate, AL

| | FIXTURE | 00/20/201/ US: | 41:18 AM FILED/CER | |
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| File with: Shelby, AL | ······································ | THE ABOVE SPACE IS | FOR FILING OFFICE U | SE ONLY |
| DEBTOR'S NAME: Provide only one Debtor name (1a c | | * * | * * | |
| ame will not fit in line 1b, leave all of item 1 blank, check her | re and provide the Individual Debtor informa | ation in item 10 of the Financing | Statement Addendum (Form | UCC1Ad) |
| 1a. ORGANIZATION'S NAME | | | | |
| 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDIT | IONAL NAME(S)/INITIAL(S) | SUFFIX |
| MCCRAINE | GREY | | | |
| MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| 305 TANYARD ROAD | HARPERSVILLE | AL | 35078 | USA |
| EBTOR'S NAME: Provide only one Debtor name (2a c | or 2b) (use exact, full name; do not omit, modify, o | or abbreviate any part of the Deb | tor's name); if any part of the | |
| ame will not fit in line 2b, leave all of item 2 blank, check her | re and provide the Individual Debtor informa | ation in item 10 of the Financing | Statement Addendum (Form | UCC1Ad) |
| 2a. ORGANIZATION'S NAME | | | | |
| | | | | |
| 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDIT | IONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | | |
| MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY |
| | | | | } |
| ECURED PARTY'S NAME (or NAME of ASSIGNEE | of ASSIGNOR SECURED PARTY): Provide only | one Secured Party name (3a or | 3b) | |
| 3a. ORGANIZATION'S NAME | | | | ************************************** |
| Renasant Bank | | | | |
| | | | | |
| | FIRST PERSONAL NAME | ADDIT | IONAL NAME(S)/INITIAL(S) | SUFFIX |
| | FIRST PERSONAL NAME | ADDII | IONAL NAME(S)/INITIAL(S) | SUFFIX |
| | FIRST PERSONAL NAME CITY | ADDIT | | |
| 3b. INDIVIDUAL'S SURNAME MAILING ADDRESS | CITY | STATI | E POSTAL CODE | COUNTRY |
| 3b. INDIVIDUAL'S SURNAME MAILING ADDRESS O Box 709 COLLATERAL: This financing statement covers the following | CITY Tupelo | STATI | POSTAL CODE 38802 | COUNTRY |
| 3b. INDIVIDUAL'S SURNAME MAILING ADDRESS O Box 709 OLLATERAL: This financing statement covers the following inventory, Chattel Paper, Accounts, Crops are going is now existing or hereafter born, raised luding all entitlements, rights to payment, and picultural diversion programs, governmental agains to program of the United States Department of | Tupelo ng collateral: nd Farm Products); whether any of to the control or grown; all accessions, additions, repayments, in whatever form received, in the collateral assistance programs, the Farence in the collateral assistance programs, the farence in the collateral assistance programs, the farence in the collateral assistance programs. | he foregoing is owned not placements, and substitute not limited to the Services Agency When | POSTAL CODE 38802 w or acquired later; White ions relating to any of a payments under any at Feed Grain Program | country USA ether any country the foregoing government , and any country |
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UCC FINANCING STATEMENT ADDENDUM **FOLLOW INSTRUCTIONS** 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME MCCRAINE Shelby Cnty Judge of Probate, AL FIRST PERSONAL NAME 08/25/2017 09:41:18 AM FILED/CERT **GREY** ADDITIONAL NAME(S)INITIAL(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS POSTAL CODE CITY STATE COUNTRY ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) **SUFFIX** 11c. MAILING ADDRESS POSTAL CODE CITY STATE **COUNTRY** 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) is filed as a fixture filing covers timber to be cut | covers as-extracted collateral 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): HAROLD MCCRAINE 2305 TANYARD RD HARPERSVILLE AL 35078 2305 TANYARD RD HARPERSVILLE, AL 35078

Prepared by Lien Solutions, P.O. Box 29071, Glendale, CA 91209-9071 Tel (800) 331-3282

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Renasant Bank

File with: Shelby, AL

17. MISCELLANEOUS: 60318493-AL-117 26405 - RENASANT BANK