		1(415114)	0	8188 1 2 18
UCC FINANCING STATEMENT AMENDMEN FOLLOW INSTRUCTIONS	T	2017100	2000357150 1/1 \$ 00	
A. NAME & PHONE OF CONTACT AT FILER (optional) Barbara Sanders 256-329-7578 74003889		Shelby	Onty Judge of Probate, 017 11:14:36 AM FILED/	
B. E-MAIL CONTACT AT FILER (optional)				
bsanders@usameribank.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
USAMERIBANK				
PO BOX 1237	j			•
ALEXANDER CITY, AL 35011				
	1			
			ACE IS FOR FILING OFFICE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 21121129000456870 Shelby County, AL	1		EMENT AMENDMENT is to be file AL ESTATE RECORDS addendum (Form UCC3Ad) <u>and</u> provide	
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 or 7 For partial assignment, complete items 7 and 9 and also indicate affected of		•	of Assignor in item 9	
4. 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				
5. PARTY INFORMATION CHANGE:		· · · · · · · · · · · · · · · · · · ·		
Check one of these two boxes: Check one of these two boxes: CHANGE name and/or address: Complete ADD name: Complete item DELETE name: Give record name				
This Change affects Debtor or Secured Party of record item 6a or 6b; and item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)				
6a. ORGANIZATION'S NAME	igo provido omy s	Marine (sa or es)	<u> </u>	
NSDKT Properties, LLC	Ternoz nennov		Tabbition at the constitution	(a) Toursey
6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL	(S) SUFFIX
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 Dabtor's name)				
7a. ORGANIZATION'S NAME				
OR 7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	<u>-</u> -			SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: AD	D collateral	DELETE collateral	RESTATE covered collateral	ASSIGN collateral
Indicate collateral:				
O NAME OF SECURED DARRY OF DECORD AUTHORIZING THIS A	MEMPMENT: D	revide as he see that (On as Ob)	/nome of Appiagos if this is an Ass	ianment)
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only gne 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 USAmeriBank, successor by merger to Aliant Bank				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL	(S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA:				