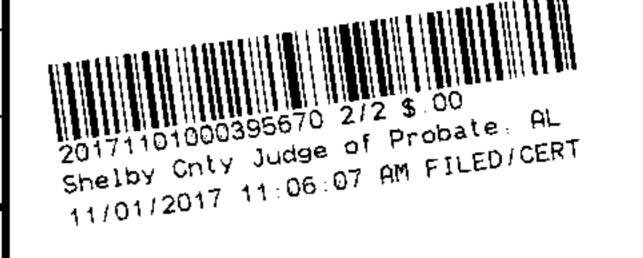


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NAME & PHONE OF CONTACT AT FILER [optional]					
Onya Tarbert 205-226-1403					
. SEND ACKNOWLEDGMENT TO: (Name and Address)					
Alabama Power Company			003956	0 1/2 \$.00	
600 18th St N		Shelby C	nty Jude	se of Probate: AL	•
Birmingham, AL 35203		11/01/20	17 11:00	5:07 AM FILED/CERT	
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INITIAL FINANCING STATEMENT FILE # 2012091400035127	70		I	his FINANCING STATEMEN be filed [for record] (or rec	
<u> </u>	·	<u>.</u>	REAL ESTATE RECORDS.		
★ TERMINATION: Effectiveness of the Financing Statement identified	ed above is terminated wit	th respect to security interest(s) of the	e Secured F	arty authorizing this Termina	ation Statement.
CONTINUATION: Effectiveness of the Financing Statement idea	ntified above with respect	to security interest(s) of the Secur	ed Party au	thorizing this Continuation S	Statement is
continued for the additional period provided by applicable law.					
ASSIGNMENT (full or partial) Give name of assignee in item 7a	or 7b and address of assig	gnee in item 7c; and also give name	of assignor	n item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment affect	cts Debtor <u>or</u> Se	ecured Party of record. Check only	one of thes	e two boxes.	
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate infor					
CHANGE name and/or address: Give current record name in item 6a name (if name change) in item 7a or 7b and/or new address (if addre		DELETE name: Give record na to be deleted in item 6a or 6b.		ADD name: Complete item 7 tem 7c; also complete items	
CURRENT RECORD INFORMATION:					
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<u></u>					
66 INDIVIDUAL'S LAST NAME	<u> </u>	FIRST NAME		MIDDLE NAME	
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CHANGED (NEW) OR ADDED INFORMATION:	 	· · · · · · · · · · · · · · · · · ·	'		 1
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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) 20120914000351270 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a ORGANIZATION'S NAME Alabama Power Company OR 12b INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

13. Use this space for additional information



THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY