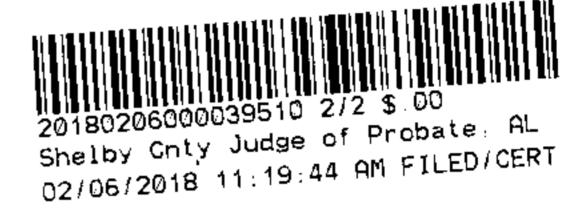
FRITZ CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME R 7b INDIVIDUAL'S LAST NAME MIDDLE NAME MIDDLE NAME SUFFIX MARTHA DENISE MIDDLE NAME SUFFIX MARTHA DENISE CITY MIDDLE NAME SUFFIX MIDDLE NAME SUFFIX MONTEVALLO AL 35115 USA AMENDMENT (COLLATERAL CHANGE): check only one box	Alabama Power Company 600 18th St N Birmingham, AL 35203 Alabama Power Company 600 18th St N Birmingham, AL 35203 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY Snel by Only 11, 19 44 AM FILED / CERT 02/10f / 2018 11, 19 44 AM FILED / CERT 02/1	OLLOW INSTRUCTIONS (front and back)	CAREFULLY			
Alabama Power Company 600 18th St N Birmingham, AL 35203 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPAC	Alabama Power Company 600 18th St N Birmingham, AL 35203 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 2010092200031870 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 2010092200031870 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENOMENT C2 (06 / 2018 11 . 19 44 Am FILED/CERT 2010092200031870 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENOMENT PROPERTY OF THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENOMENT C2 (06 / 2018 11 . 19 44 Am FILED/CERT 2010092200031870 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENOMENT PROPERTY OF THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENOMENT C2 (06 / 2018 11 . 19 44 Am FILED/CERT 20 10092200031870 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT AMENOMENT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 44 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C2 (06 / 2018 11 . 19 4 Am FILED/CERT C		rk [opuonar]			
Birmingham, AL 35203 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY The FINANCING STATEMENT AMENCMENT OZONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITION OF THE ABOVE PARTY AUTHORIZING THE OFFICE OFFI	600 18th St N Birmingham, AL 35203 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 20180/2056/2019 11:19 44 AM FILED / GERT 02/105/2019 11:19 1		e and Address)			21 5/6 .
Birmingham, AL 35203 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY The FINANCING STATEMENT AMENCMENT OZONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement OCONITION OF THE ABOVE PARTY AUTHORIZING THE OFFICE OFFI	600 18th St N Birmingham, AL 35203 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 20180/2056/2019 11:19 44 AM FILED / GERT 02/105/2019 11:19 1					
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 20100922000311870 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE ONLY THE ABOVE SPACE IS FOR FILING OFFICE ONLY THE ABOVE SPACE IS FOR FILING OFFICE ONLY THE ABOVE SPACE IS THE WINDOW	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 20100922000311870 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 210. This FINANCING STATEMENT AMENDMENT to be filed for recorded in the filed office of the continued of the filed for recorded in the filed shows is terminated with respect to security interest(s) of the Secured Party authorizing this 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 assignee in item 7c, and also give name of assignor in item 9 AMENDMENT (PARTY INFORMATION). This Amendment affects Debtor or Secured Party authorizing this Continued to the additional period provided phycioparte information in items 8 and/or 7 AISO check one of the following times boxes and provide appropriate information in items 8 and/or 7 AISO check one of the following time boxes and provide appropriate information in items 8 and/or 7 CHANDE mane and/or address. Give current record name in dem 8a or 6b also give new of the mane change in item 7a or 7b and of the second name in dem 8a or 6b also give new of the second name in dem 6a or 6b also give new of the second name in dem 6a or 6b also give new of the second name in dem 6a or 6b also give new of the second name in dem 6a or 6b also give new of the second name in the file of the second name in dem 6a or 6b also give new of the second name in dem 6a or 6b also give new of the second name in dem 6a or 6b also give new of the second name in dem 6a or 6b also give new of the second name in dem 6a or 6b and/or 7a also complete items 7a or 7b, and also give new of the second name in dem 6a or 6b and/or 7a also complete items 7a or 7b, and also give new of the second name in dem 6a or 6b and/or 7a also complete items 7a or 7b, and also give new of the second name in dem 6a or 6b and/or 7b and also give new of the second name in dem 6a or 6b and/or 7b and also give new of the second name in dem 6a	2 2			\$.00	AL
THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE ## 20100922000311870 TERMINATION Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Continuation 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 assignee in item 7c, and also give name of assigner in item 9 AMENDMENT (PARTTY INFORMATION) This Amendment affects Debtor or Secured Party of record Check only 91e of these two boxes CHANGE name and/or address. Give current record name in femals of 98 and 90 pin envir DELETE name Give record name ADD name Complete item 7a or 7b, and also many (if anothers) CHANGE name and/or address. Give current record name and dispenses. Give current record name and/or address. Give current record name and/or address. Give according to them following three tones and provide appropriate information in lems 5 and/or 7 CHANGE name and/or address. Give current record name and/or address. Give according to them 7a or 7b and also many (if many dispenses) DELETE name Give record name ADD name Complete item 7a or 7b, and also many (if many dispenses) ADD name Complete item 7a or 7b, and also many (if applicate item 7c, also complete items 7c, and also complete items 7c, also complete items 7c, and also complete items 7c, also complete items 7c, and also complete items 7c	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY INITIAL FINANCING STATEMENT FILE # 20100922000311870 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY The Financing Statement dentified above is terminated with respect to security interest(s) of the Secured Party authorizing this Continuation Statement CONTINUATION. Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement Continued for the additional penced provided by applicable law ASSIGNMENT (full or partial). Give name of assignee in tiem 7a or 7b and address of assignee in item 7c, and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects			2018020 Shelby	Cnty Judge of Probate	CERT
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Continuation Statement. CONTINUATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Continuation Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation 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 assignee in item 7c, and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record Check only gog of these two boxes. Also check one of the following three soves and provide appropriate information in items 6 and/or 7. AND name of manne and one in the 7a or 7b and/or name in tem 6a or 6b also give new. ALD name of manne and one in the 7a or 7b and/or name address of assignee in item 7c. ADD name. Complete them 7a or 7b and/or name address of 6b also give name of assignee in item 7a, also complete them 7a or 7b and also give name of name in the 7a or 7b and/or name in them 6a of 6b and/or 7. CURRENT RECORD INFORMATION: 8a ORGANIZATION'S NAME FIRST NAME MARTHA MIDDLE NAME SUFFIX POSTAL CODE COUNTRY AL 35115 USA AMENDMENT (COLLATERAL CHANGE): check only one box	INITIAL FINANCING STATEMENT FILLE # 20100922000311870			02/06/2	2018 11:13.1	
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Continuation Statement. CONTINUATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Continuation Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation 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 assignee in item 7c, and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record Check only gog of these two boxes. Also check one of the following three soves and provide appropriate information in items 6 and/or 7. AND name of manne and one in the 7a or 7b and/or name in tem 6a or 6b also give new. ALD name of manne and one in the 7a or 7b and/or name address of assignee in item 7c. ADD name. Complete them 7a or 7b and/or name address of 6b also give name of assignee in item 7a, also complete them 7a or 7b and also give name of name in the 7a or 7b and/or name in them 6a of 6b and/or 7. CURRENT RECORD INFORMATION: 8a ORGANIZATION'S NAME FIRST NAME MARTHA MIDDLE NAME SUFFIX POSTAL CODE COUNTRY AL 35115 USA AMENDMENT (COLLATERAL CHANGE): check only one box	INITIAL FINANCING STATEMENT FILLE # 20100922000311870					
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Termination 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 assignee in item 7c, and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects Debtor of Secured Party of record. Check only ging of these two boxes. ASSIGNMENT (will or partial). Give name of assignee in item 7a or 7b and address of assignee in item 7c, and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects Debtor of Secured Party of record. Check only ging of these two boxes. ASSIGNMENT (will or partial). Give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects Debtor of Secured Party of record. Check only ging of these two boxes. ASSIGNMENT (will or partial). Give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects Debtor of Secured Party of record. Check only ging of these two boxes. ASSIGNMENT (will or partial). Give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects and or 8b also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects and or 8b also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects and or 8b also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects and or 8b also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects and or 8b also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenment affects and or 8b also give name of assignor in item 9. AMENDMENT (PARTY INFORMATI	TERMINATION. Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Termination Statement. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation 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 assignee in item 7c, and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenoment affects Debtor of Secured Party of record. Check only ging of these two boxes. ASSIGNMENT (item of partial): Give name of assignee in item 7c and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenoment affects Debtor of Secured Party of record. Check only ging of these two boxes. ASSIGNMENT (item 7c, and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amenoment affects Debtor of Secured Party of record. Check only ging of these two boxes. ASSIGNMENT (INFORMATION): This Amenoment affects Debtor of Debtor of Secured Party of record. Check only ging of these two boxes. ASSIGNMENT (INFORMATION): This Amenoment affects and of Secured Party of record. Check only ging box. AND name of Continuation of Secured Party of record. Check only ging box. AND name of Continuation of Secured Party of record. Check only ging box. AND name of Secured Party of record. Check only ging box. AND name of Secured Party of record. Check only ging box. AND name of Secured Party of record. Check only ging box. AND name of Secured Party of record. Check only ging box. AND name of Secured Party of record. Check only ging box. AND name of Secured Party of record. Check only ging box. AND name of Secured Pa	a INITIAL FINANCING STATEMENT FILE#		THE ABO		
CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation 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 assignee in item 7c, and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects	CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation 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 assignee in item 7c, and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects □ Debtor ② □ Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. AISO Check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address. Give current record name in tem 5a or 6b also give new □ DELETE name. Give record name. □ ADD name. Complete item 7a or 7b, and also name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. □ Detete name. □ Detete name. □ ADD name. Complete item 7a or 7b, and also name (if name change) in item 7a or 7b and/or new address. (if address change) in item 7c. □ Detete name. □ Detete name. □ ADD name. Complete item 7a or 7b, and also name (if name change) in item 7a or 7b and/or new address. (if address change) in item 7c. □ Detete name. □ Detete name. □ ADD name. □ Complete item 7a or 7b, and also name (if name change) in item 7c, also complete item 7a or 7b, and also name (if name change) in item 7c and 7b and also name. □ Detete name. □ ADD name. □ Complete item 7a or 7b, and also name. □ Detete		100922000311870			
ASSIGNMENT (full or partial). Give name of assignee in item 7a or 7b and address of assignee in item 7c, and also give name of assignor in item 9 AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record Check only one of these two boxes Also check one of the following three boxes and provide appropriate information in items 6 and/or 7 CHANGE name and/or address. Give current record name in item 8a or 6b also give new name of assignor in item 7a or 7b and also complete item 7a or 7b and also name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c To be deleted in item 8a or 6b Debtor or Debtor or Debtor name Debtor or Debtor name Debto	ASSIGNMENT (full or partial). Give name of assignee in item 7a or 7b and address of assignee in item 7c, and also give name of assignor in item 9 AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record Check only one of these two boxes Also check one of the following three boxes and provide appropriate information in items 6 and/or 7 ChanGe name and/or address. Give current record name in item 8a or 6b also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. The deliver of be delicted in item 8a or 6b CURRENT RECORD INFORMATION: 6a ORGANIZATION'S NAME FRITZ CHANGED (NEW) OR ADDED INFORMATION. 7a ORGANIZATION'S NAME FIRST NAME MIDDLE NAME MIDDLE NAME DENISE MARTHA DENISE MIDDLE NAME SUFFIX MARTHA MIDDLE NAME SUFFIX MARTHA MIDDLE NAME SUFFIX MARTHA MIDDLE NAME SUFFIX MONTEVALLO AL 35115 USA AMENDMENT (COLLATERAL CHANGE): check only ging box					
AMENDMENT (PARTY INFORMATION): This Amendment affects	AMENDMENT (PARTY INFORMATION): This Amendment affects	• •		espect to security interest(s) of the	Secured Party authorizing this Con	itinuation Statement is
Also check one of the following three boxes and provide appropriate information in items 6 and/or 7 CHANGE name and/or address. Give current record name in item 6a or 6b also give new name (if name change) in item 7a or 7b and alto name (if name change) in item 7a or 7b and alto name (if name change) in item 7a or 7b and alto name (if name change) in item 7a or 7b and alto name (if name change) in item 7a or 7b and alto name (if name change) in item 7a or 7b and alto name (if name change) in item 7a or 7b and alto name (if name change) in item 7a or 7b and alto name (if name change) in item 7a or 7b and alto name (if name change) in item 7a or 7b, and alto name (if name change) in item 7a or 8b or 6b	Also check one of the following three boxes and provide appropriate information in items 6 and/or 7 CHANGE name and/or address. Give current record name in item 6a or 6b also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME Replication of the following three boxes and provide appropriate information in items 6a or 6b also give new to be deleted in item 6a or 6b item 7c, also complete items 7d-7g (if application to be deleted in item 6a or 6b item 7c, also complete items 7d-7g (if application to be deleted in item 6a or 6b item 7c, also complete items 7d-7g (if application to be deleted in item 6a or 6b item 7c, also complete items 7d-7g (if application to be deleted in item 6a or 6b item 7c, also complete items 7d-7g (if application to be deleted in item 6a or 6b item 7c, also complete items 7d-7g (if application items 6a or 6b item 7c, also complete items 7d-7g (if application items 6a or 6b item 7c, also complete items 7d-7g (if application items 6a or 6b item 7c, also complete items 7d-7g (if application 7c) also complete items 7d-7g (if application 7c) also complete item 7a or 7b, and also item 7c, also complete item 7a or 7b, and also item 7c, also complete item 7a or 7b, and also item 7c, also complete item 7a or 7b, and also item 7c, also complete item 7a or 7b, and also item 7c, also complete item 7a or 7b, and also item 7c, also complete item 7a or 7b, and also item 7c, also complete item 7a or 7b, and also item 7c, also complete item 7a or 7b, and also item 7c, also complete item 7a or 7b, and also item 7c, also complete item 7c, also c	ASSIGNMENT (full or partial). Give nan	ne of assignee in item 7a or 7b and address o	of assignee in item 7c; and also give	name of assignor in item 9.	
CHANGE name and/or address. Give current record name in item 6a or 6b also give new mane (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. CURRENT RECORD INFORMATION: First name DELETE name Give record name ADD name Complete item 7a or 7b and also name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. ADD name Complete item 7a or 7b, and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name change) in item 7a or 7b and also name (if name 7a or 7b and also name (item 7a or 7b and also na	CHANGE name and/or address. Give current record name in item 6a or 6b. also give new many in item 7a or 7b and also give new address (if address change) in item 7c. also complete item 7a or 7b and also diem 7c, also complete item 7a or 7b and also diem 7c, also complete items 7d-7g (if application in item 6a or 6b). The first name is to be deleted in item 6a or 6b. also give new address (if address change) in item 7c. also complete items 7d-7g (if application in item 7c, also complete items 7d-7g (if application in item 6a or 6b). The first name is to be deleted in item 6a or 6b. also deleted in item 6a or 6b. al			Last	ck only <u>one</u> of these two boxes	
name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. I to be deleted in item 5a or 6b item 7c, also complete items 7d-7g (if applicate CURRENT RECORD INFORMATION: [6a ORGANIZATION'S NAME] [7a ORGANIZATION'S NAME] [7b INDIVIDUAL'S LAST NAME] [7c INDIVIDUAL'S LAST NAME] [7d	name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. I to be deleted in item 5a or 6b. I item 7c, also complete items 7d-7g (if application for providing them 7c.) In them 7c. I to be deleted in item 5a or 6b. I item 7c, also complete items 7d-7g (if application for providing them 7c.) In them 7c. I to be deleted in item 5a or 6b. Interm 7c, also complete items 7d-7g (if application for a few for providing them 7c.) In them 7c. I to be deleted in item 5a or 6b. Interm 7c, also complete items 7d-7g (if application for a few for providing item 7c. I to be deleted in item 5a or 6b. Interm 7c, also complete items 7d-7g (if application for a few for providing item 7c. I to be deleted in item 5a or 6b. Interm 7c, also complete items 7d-7g (if application for providing item 7c. Item 7c, also complete items 7d-7g (if application for providing item 7c. I	-			cord name	plete item 7a or 7b, and also
First name Middle name Suffix	FIRST NAME MIDDLE NAME SUFFIX CHANGED (NEW) OR ADDED INFORMATION: 76 ORGANIZATION'S NAME R 76 INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX FIRST NAME MIDDLE NAME SUFFIX ORGANIZATION'S NAME FIRST NAME MIDDLE NAME SUFFIX ORGANIZATION STATE POSTAL CODE COUNTRY MONTEVALLO AL 35115 USA AMENDMENT (COLLATERAL CHANGE): check only gng box	name (if name change) in item 7a or 7b and	Vor new address (if address change) in item			
FRITZ CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME R 7b INDIVIDUAL'S LAST NAME MIDDLE NAME MIDDLE NAME SUFFIX MARTHA DENISE MIDDLE NAME SUFFIX MARTHA DENISE CITY MIDDLE NAME SUFFIX MIDDLE NAME SUFFIX MONTEVALLO AL 35115 USA AMENDMENT (COLLATERAL CHANGE): check only one box	FRITZ CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b' INDIVIDUAL'S LAST NAME MIDDLE NAME MIDDLE NAME SUFFIX MARTHA DENISE ORGANIZATION'S NAME OUTY STATE POSTAL CODE COUNTRY MONTEVALLO AL 35115 USA AMENDMENT (COLLATERAL CHANGE): check only one box					
FRITZ CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME R 7b INDIVIDUAL'S LAST NAME MIDDLE NAME MIDDLE NAME SUFFIX MARTHA DENISE MIDDLE NAME SUFFIX MARTHA DENISE CITY MIDDLE NAME SUFFIX MIDDLE NAME SUFFIX MONTEVALLO AL 35115 USA AMENDMENT (COLLATERAL CHANGE): check only one box	FRITZ CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME 7b' INDIVIDUAL'S LAST NAME MIDDLE NAME MIDDLE NAME SUFFIX MARTHA DENISE ORGANIZATION'S NAME OUTY STATE POSTAL CODE COUNTRY MONTEVALLO AL 35115 USA AMENDMENT (COLLATERAL CHANGE): check only one box					
CHANGED (NEW) OR ADDED INFORMATION: 7a ORGANIZATION'S NAME	CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	R COUNTRY OF A CENTRAL COUNTRY			IMIDDLE NAME	Terrety
Ta. ORGANIZATION'S NAME To INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX CITY MONTEVALLO MONTEVALLO TAX ID #: SSN OR EIN ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box	TAL ORGANIZATION'S NAME TO INDIVIDUAL'S LAST NAME MIDDLE NAME SUFFIX MAILING ADDRESS 8 OAKDALE DR CITY MONTEVALLO TAX ID #: SSN OR EIN ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box	OD INDIVIDUALS LAST NAME				SUFFIX
**MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY **8 OAKDALE DR **TAX ID #: SSN OR EIN ORGANIZATION DEBTOR **AMENDMENT (COLLATERAL CHANGE): check only one box **TAX ID #: SSN OR EIN ORGANIZATION DEBTOR **TAX ID #: SSN ORGANIZATION DEBTOR **TAX ID #: SSN ORGANIZATION DEBTOR **TAX ID #: SSN ORGANIZATION DEBTOR **TAX ID #:	MAILING ADDRESS MAILING ADDRESS CITY MONTEVALLO TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION DEBTOR DEBTOR DEBTOR ORGANIZATION DEBTOR ORGANIZATION DEBTOR ORGANIZATION ORGANIZA	FRITZ	MA			SUFFIX
MAILING ADDRESS 8 OAKDALE DR MONTEVALLO MONTEVALLO 76 JURISDICTION OF ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box	MAILING ADDRESS 8 OAKDALE DR MONTEVALLO AL 35115 USA TAX ID #: SSN OR EIN ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box	FRITZ CHANGED (NEW) OR ADDED INFORMATI	MA			SUFFIX
8 OAKDALE DR I. TAX ID #: SSN OR EIN ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box MONTEVALLO AL 35115 To JURISDICTION OF ORGANIZATION	8 OAKDALE DR TAX ID #: SSN OR EIN ORGANIZATION DEBTOR ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box	FRITZ CHANGED (NEW) OR ADDED INFORMATI 7a. ORGANIZATION'S NAME	ION:	ARTHA	DENISE	
AMENDMENT (COLLATERAL CHANGE): check only one box	TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any ORGANIZATION No. 1 DEBTOR 1	FRITZ CHANGED (NEW) OR ADDED INFORMATI 7a. ORGANIZATION'S NAME	ION:	ARTHA	DENISE	
ORGANIZATION DEBTOR NO DEB	ORGANIZATION DEBTOR NAMENDMENT (COLLATERAL CHANGE): check only one box	FRITZ CHANGED (NEW) OR ADDED INFORMATI 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME	ION:	ARTHA	MIDDLE NAME STATE POSTAL COM	SUFFIX DE COUNTRY
AMENDMENT (COLLATERAL CHANGE): check only one box	AMENDMENT (COLLATERAL CHANGE): check only one box	FRITZ CHANGED (NEW) OR ADDED INFORMATI 7a. ORGANIZATION'S NAME 7b INDIVIDUAL'S LAST NAME MAILING ADDRESS 8 OAKDALE DR	ION: FIRST CITY MC	NAME	MIDDLE NAME STATE POSTAL COS AL 35115	SUFFIX DE COUNTRY USA
	,	FRITZ CHANGED (NEW) OR ADDED INFORMATI 7a. ORGANIZATION'S NAME 7b INDIVIDUAL'S LAST NAME MAILING ADDRESS 8 OAKDALE DR I. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION	ION: FIRST CITY MC	NAME	MIDDLE NAME STATE POSTAL COS AL 35115	SUFFIX COUNTRY USA ID #, if any
		FRITZ CHANGED (NEW) OR ADDED INFORMATI 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 8 OAKDALE DR 1. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR	ON: FIRST CITY MC 7e. TYPE OF ORGANIZATION 7f JU	NAME	MIDDLE NAME STATE POSTAL COS AL 35115	SUFFIX COUNTRY USA ID #, if any
		FRITZ CHANGED (NEW) OR ADDED INFORMATION S NAME 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 8 OAKDALE DR 1. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE	FIRST CITY MC 7e. TYPE OF ORGANIZATION 7f JU E): check only one box	NAME ONTEVALLO RISDICTION OF ORGANIZATION	MIDDLE NAME STATE POSTAL COM AL 35115 7g. ORGANIZATIONAL	SUFFIX DE COUNTRY USA ID #, if any
		FRITZ CHANGED (NEW) OR ADDED INFORMATION OR ADDED INFORMATION OR ADDED INFORMATION OR ADDITIONAL OR AMENDMENT (COLLATERAL CHANGE OR AMENDMENT	FIRST CITY MC 7e. TYPE OF ORGANIZATION 7f JU E): check only one box	NAME ONTEVALLO RISDICTION OF ORGANIZATION	MIDDLE NAME STATE POSTAL COM AL 35115 7g. ORGANIZATIONAL	SUFFIX COUNTRY USA ID #, if any
		FRITZ CHANGED (NEW) OR ADDED INFORMATION S NAME 7a. ORGANIZATION'S NAME R 7b INDIVIDUAL'S LAST NAME MAILING ADDRESS 8 OAKDALE DR I. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE	FIRST CITY MC 7e. TYPE OF ORGANIZATION 7f JU E): check only one box	NAME ONTEVALLO RISDICTION OF ORGANIZATION	MIDDLE NAME STATE POSTAL COM AL 35115 7g. ORGANIZATIONAL	SUFFIX COUNTRY USA ID #, if any
		FRITZ CHANGED (NEW) OR ADDED INFORMATION S NAME 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS 8 OAKDALE DR 1. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE	FIRST CITY MC 7e. TYPE OF ORGANIZATION 7f JU E): check only one box	NAME ONTEVALLO RISDICTION OF ORGANIZATION	MIDDLE NAME STATE POSTAL COM AL 35115 7g. ORGANIZATIONAL	SUFFIX COUNTRY USA ID #, if any
		FRITZ CHANGED (NEW) OR ADDED INFORMATION NAME 7a. ORGANIZATION'S NAME To INDIVIDUAL'S LAST NAME MAILING ADDRESS 8 OAKDALE DR d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE	FIRST CITY MC 7e. TYPE OF ORGANIZATION 7f JU E): check only one box	NAME ONTEVALLO RISDICTION OF ORGANIZATION	MIDDLE NAME STATE POSTAL COM AL 35115 7g. ORGANIZATIONAL	SUFFIX DE COUNTRY USA ID #, if any
		FRITZ CHANGED (NEW) OR ADDED INFORMATION NAME 7a. ORGANIZATION'S NAME R 7b INDIVIDUAL'S LAST NAME C MAILING ADDRESS 8 OAKDALE DR d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE)	FIRST CITY MC 7e. TYPE OF ORGANIZATION 7f JU E): check only one box	NAME ONTEVALLO RISDICTION OF ORGANIZATION	MIDDLE NAME STATE POSTAL COM AL 35115 7g. ORGANIZATIONAL	SUFFIX DE COUNTRY USA ID #, if any
		FRITZ CHANGED (NEW) OR ADDED INFORMATION NAME 7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S LAST NAME C MAILING ADDRESS 8 OAKDALE DR d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE)	FIRST CITY MC 7e. TYPE OF ORGANIZATION 7f JU E): check only one box	NAME ONTEVALLO RISDICTION OF ORGANIZATION	MIDDLE NAME STATE POSTAL COM AL 35115 7g. ORGANIZATIONAL	SUFFIX DE COUNTRY USA ID #, if any
		FRITZ CHANGED (NEW) OR ADDED INFORMATION NAME 7a. ORGANIZATION'S NAME MAILING ADDRESS 8 OAKDALE DR M. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE)	FIRST CITY MC 7e. TYPE OF ORGANIZATION 7f JU E): check only one box	NAME ONTEVALLO RISDICTION OF ORGANIZATION	MIDDLE NAME STATE POSTAL COM AL 35115 7g. ORGANIZATIONAL	SUFFIX COUNTRY USA ID #, if any
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which		FRITZ CHANGED (NEW) OR ADDED INFORMATION OR ADDED INFORMATION OR	FIRST CITY MC Te. TYPE OF ORGANIZATION To give entire restated collateral descriptions or give entire restated collateral descriptions.	NTEVALLO RISDICTION OF ORGANIZATION pulon, or describe collateral a	MIDDLE NAME STATE POSTAL COT AL 35115 7g. ORGANIZATIONAL assigned Assignment). If this is an Amendment	SUFFIX DE COUNTRY USA ID #, if any No
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DESTOR authorizing this Amendment.	adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DESTOR authorizing this Amendment.	FRITZ CHANGED (NEW) OR ADDED INFORMATION OR ORGANIZATION'S NAME 75 INDIVIDUAL'S LAST NAME MAILING ADDRESS 8 OAKDALE DR d. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE Describe collateral deleted or added.) NAME OF SECURED PARTY OF RECORDS COllateral or adds the authorizing Debtor.	FIRST CITY MC Te. TYPE OF ORGANIZATION To give entire restated collateral descriptions or give entire restated collateral descriptions.	NTEVALLO RISDICTION OF ORGANIZATION pulon, or describe collateral a	MIDDLE NAME STATE POSTAL COT AL 35115 7g. ORGANIZATIONAL assigned Assignment). If this is an Amendment	SUFFIX DE COUNTRY USA ID #, if any No
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DESTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME	adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DESTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME	FRITZ CHANGED (NEW) OR ADDED INFORMATION OR ADDED INFORMATION NAME TO INDIVIDUAL'S LAST NAME MAILING ADDRESS 8 OAKDALE DR TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE Describe collateral deleted or added. NAME OF SECURED PARTY OF RECARDS ADDRESS AD	FIRST CITY MC Te. TYPE OF ORGANIZATION To give entire restated collateral descriptions or give entire restated collateral descriptions.	NTEVALLO RISDICTION OF ORGANIZATION pulon, or describe collateral a	MIDDLE NAME STATE POSTAL COT AL 35115 7g. ORGANIZATIONAL assigned Assignment). If this is an Amendment	SUFFIX DE COUNTRY USA ID #, if any Not
adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME Alabama Power Company	adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DESTOR authorizing this Amendment. 9a. ORGANIZATION'S NAME Alabama Power Company	FRITZ CHANGED (NEW) OR ADDED INFORMATION OR ADDED INFORMATION OR ADDITION OR ADDITION OR ADDITION OR ADDITION OR ORGANIZATION OR ADDITION OR ORGANIZATION OR OR ORGANIZATION OR ORGANIZATION OR ORGANIZATION	FIRS CITY MC Te. TYPE OF ORGANIZATION To give entire restated collateral description or give entire restated collateral description for if this is a Termination authorized by a Deliver the property of this is a Termination authorized by a Deliver the property of the	NTEVALLO RISDICTION OF ORGANIZATION Pulon. or describe collateral a and enter name	MIDDLE NAME STATE POSTAL COL AL 35115 7g. ORGANIZATIONAL assigned Assignment). If this is an Amendment of DEBTOR authorizing this Amendment is a sign of the s	SUFFIX DE COUNTRY USA ID #, if any NO No No No No No No No No No

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

	O 1771 E		
OLLOW INSTRUCTIONS	(front and bac	ck) CAREFULLY	
11. INITIAL FINANCING S	ATEMENT F	ILE # (same as item 1a on Am	endment form)
201009220	00311870		
12. NAME OF PARTY AU		ΓΗ∤S AMENDMENT (same as	sitem 9 on Amendment form)
Alabama Power C			
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