Jacqueline Cox				
NAME & PHONE OF CONTACT AT FILER (optional) Jacqueline Cox E-MAIL CONTACT AT FILER (optional)				
SEND ACKNOWLEDGMENT TO: (Name and Address)				
	2018	03150000085190 1 by Cnty Judge o	1/2 \$38.00	
Spire Alabama, Inc.		5/2018 12:47:33		
2101 6th Avenue North Birmingham, AL 35203				
	THE AL	BOVE SPACE IS FO	R FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (us	se exact, full name, do not omit, modify, or abbreviate	e any part of the Debtor	's name); if any part of the tr	ndividual De
name will not fit in line 1b, leave all of item 1 blank, check here	and provide the Individual Debtor Information in item	10 of the Financing Sta	atement Addendum (Form U	
			NIAL ALABETIC VARIETIALION	SUFFIX
		ABBITIO		INDEEDA
16 INDIVIDUAL'S SURNAME	Gregory	ADDITIO	NAL NAME(S)/INITIAL(S)	
Eddins MAILING ADDRESS	Gregory	Paul STATE	POSTAL CODE	COUNT
Eddins MAILING ADDRESS 011 Longleaf Lane	Gregory CITY Helena	Paul STATE AL	POSTAL CODE 35080	COUNTR
Eddins MAILING ADDRESS DIT Longleaf Lane DEBTOR'S NAME. Provide only one Debtor name (2a or 2b) (us	Gregory CITY Helena	Paul STATE AL e any part of the Debtor	POSTAL CODE 35080 's name); if any part of the In	COUNT US
Eddins MAILING ADDRESS DIT Longleaf Lane DEBTOR'S NAME. Provide only one Debtor name (2a or 2b) (us	Gregory CITY Helena se exact, full name: do not omit, modify, or abbreviate	Paul STATE AL e any part of the Debtor	POSTAL CODE 35080 's name); if any part of the In	COUNT US
Eddins MAILING ADDRESS DIT Longleaf Lane DEBTOR'S NAME. Provide only one Debtor name (2a or 2b) (us name will not fit in line 2b, leave all of item 2 blank, check here	Gregory CITY Helena se exact, full name: do not omit, modify, or abbreviate	Paul STATE AL e any part of the Debtor 10 of the Financing Sta	POSTAL CODE 35080 's name); if any part of the In	COUNT US Individual DelicC1Ad)
Eddins MAILING ADDRESS DIT Longleaf Lane DEBTOR'S NAME. Provide only one Debtor name (2a or 2b) (us name will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME	CITY Helena se exact, full name: do not omit, modify, or abbreviate and provide the Individual Debtor information in item FIRST PERSONAL NAME	Paul STATE AL e any part of the Debtor 10 of the Financing Sta	POSTAL CODE 35080 's name); if any part of the Inatement Addendum (Form U	COUNTI US Individual De ICC1Ad)
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Eddins MAILING ADDRESS DIT Longleaf Lane DEBTOR'S NAME. Provide only one Debtor name (2a or 2b) (us name will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME ABLENG ADDRESS BECURED PARTY'S NAME for NAME of ASSIGNEE of ASSIGNEE Alabama, Inc.	Gregory CITY Helena se exact, full name: do not omit, modify, or abbreviate and provide the Individual Debtor information in item FIRST PERSONAL NAME CITY	Paul STATE AL e any part of the Debtor 10 of the Financing State ADDITION STATE ed Party name (3a or 3b)	POSTAL CODE 35080 's name); if any part of the Inatement Addendum (Form United NAL NAME(S)/INITIAL(S) POSTAL CODE	COUNTI US Individual De ICC1Ad)
Eddins MAILING ADDRESS O11 Longleaf Lane DEBTOR'S NAME. Provide only one Debtor name (2a or 2b) (us name will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME MAILING ADDRESS SECURED PARTY'S NAME for NAME of ASSIGNEE of ASSIGNEE Alabama, Inc.	Gregory CITY Helena se exact, full name: do not omit, modify, or abbreviate and provide the Individual Debtor information in item FIRST PERSONAL NAME CITY GNOR SECURED PARTY): Provide only one Secure	Paul STATE AL e any part of the Debtor 10 of the Financing State ADDITION STATE ed Party name (3a or 3b)	POSTAL CODE 35080 's name); if any part of the Inatement Addendum (Form University) NAL NAME(S)/INITIAL(S) POSTAL CODE	COUNTY OUT OF THE COUNTY COUNTY

	
5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative
6a. Check only if applicable and check only one box.	6b. Check only if applicable and check only one box.
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agnoultural Lien Non-UCC Filing
7 ALTERNATIVE DESIGNATION (if applicable) Lessee/Lessor Consignee/Consignor Seller/Buy	er Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:	

UCC FINANCING STATEMENT ADDENDUM

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank.

FOLLOW INSTRUCTIONS

-	9a ORGANIZATION'S NAME					
	96. INDIVIDUAL'S SURNAME	20180315000085190 2/2 \$38.00 20180315000085190 2/2 \$38.00 Shelby Cnty Judge of Probate: AL 03/15/2018 12:47:33 PM FILED/CERT				
ļ	Eddins	03/15/2	010 12:41.44			
	FIRST PERSONAL NAME					
ļ	Gregory	1				
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	<u>{</u>			
	Paul	<u> </u>		E IS FOR FILING OFFICE		
(DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor name or do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mater and ORGANIZATION'S NAME		a line 1b or 2b of the Financi	ng Statement (Form UCC1) (us	e exact, full n	
R	10b INDIVIDUAL'S SURNAME					
i				· <u> </u>		
	INDIVIDUAL'S FIRST PERSONAL NAME					
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX	
ж	MAILING ADDRESS	CITY	STA	E POSTAL CODE	COUNTI	
1 [ADDITIONAL SECURED PARTY'S NAME or	OR SECURED PARTY	"S NAME: Provide only on	e name (11a or 11b)		
- 1	11a ORGANIZATION'S NAME Associated Cooling and Heating					
o L	11b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADD	TIONAL NAME(S)/INITIAL(S)	SUFFIX	
1						
	MAILING ADDRESS	CITY	STAT	E POSTAL CODE	COUNTR	
39	MAILING ADDRESS 27 Gadsden Hwy ADDITIONAL SPACE FOR ITEM 4 (Collateral)	Trussville		1	COUNT	
39 2. A	27 Gadsden Hwy		STATA A.I.	35173	US	
3. [DDITIONAL SPACE FOR ITEM 4 (Collateral) This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	14. This FINANCING STATE	MENT: cut covers as-extracted.	35173	US	
39 2. A	ADDITIONAL SPACE FOR ITEM 4 (Collateral) This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) Tame and address of a RECORD OWNER of real estate described in item 16	14. This FINANCING STATI covers timber to be 16. Description of real estat 3011 Longleaf La Helena, AL 3508	EMENT: cut covers as-extracted. ne 0	35173	US	
89 2. A	ADDITIONAL SPACE FOR ITEM 4 (Collateral) This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) Tame and address of a RECORD OWNER of real estate described in item 16	14. This FINANCING STATE covers timber to be 16. Description of real estate 3011 Longleaf La	STATA AI Cut	35173	US	