DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor informa sony and the Individual Debtor informa and provide the Individual Debtor informa and provide the Individual Debtor informa and provide the Individual Debtor informa and DR and DRESS URNAME 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME C. MAILING ADDRESS CITY SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only information and provide the Individual Debtor information.	ion in item 10 of the Financing St ADDITIO STATE AL abbreviate any part of the Debtor	DNAL NAME(S)/INITIAL(S) POSTAL CODE 35007 or's name); if any part of the In	SUFFIX COUNTRY USA
The Individual's surname MOORE The Mailing address 133 TIMBERLEAF CIRCLE CITY Alabaster The Mailing address 133 TIMBERLEAF CIRCLE CITY Alabaster The Mailing address 133 TIMBERLEAF CIRCLE The Mailing address 133 TIMBERLEAF CIRCLE The Mailing address 133 TIMBERLEAF CIRCLE CITY Alabaster The Mailing address 133 TIMBERLEAF CIRCLE The Mailing address 133 TIMBERLEAF CIRCLE CITY Alabaster The Mailing address 133 TIMBERLEAF CIRCLE The Mailing address 133 TIMBERLEAF CIRCLE The Mailing address 133 TIMBERLEAF CIRCLE CITY Alabaster The Mailing address 133 TIMBERLEAF CIRCLE The Mailing address 133 TIMBERLEAF CIRCLE	STATE AL abbreviate any part of the Debtorion in item 10 of the Financing St	POSTAL CODE 35007 or's name); if any part of the Ir	COUNTRY USA
The individual's surname individual personal name in the individual personal name individual name individu	STATE AL abbreviate any part of the Debtorion in item 10 of the Financing St	POSTAL CODE 35007 or's name); if any part of the Ir	COUNTRY USA
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor informa 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME 3. MAILING ADDRESS CITY	abbreviate any part of the Debtorion in item 10 of the Financing St	35007 or's name); if any part of the Ir	USA ndividual Debte
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor informa 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME CITY	abbreviate any part of the Debtor ion in item 10 of the Financing St	r's name); if any part of the Ir	ndividual Debte
3a. ORGANIZATION'S NAME Foundation Finance Company LLC			OHEE184
'` 3b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
c. MAILING ADDRESS 7802 Meadow Rock Drive Weston	STATE	54476	COUNTRY
COLLATERAL: This financing statement covers the following collateral: Roof Total value of collateral for AL Recordation Tax is \$6,500.00 SONYA MOORE 133 TIMBERLEAF CIRCLE Alabaster, AL 35007			

1461 90152

8. OPTIONAL FILER REFERENCE DATA: :1-489933-1

20180504000152790 05/04/2018 01:06:01 PM UCC1 2/2

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 MOORE FIRST PERSONAL NAME SONYA **SUFFIX** ADDITIONAL NAME(S)/INITIAL(S) 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 COUNTRY 10c. MAILING ADDRESS CITY POSTAL CODE STATE ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(\$)/INITIAL(\$) SUFFIX FIRST PERSONAL NAME POSTAL CODE COUNTRY 11c. MAILING ADDRESS STATE CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): Filed and Recorded Official Public Records Judge James W. Fuhrmeister, Probate Judge, **County Clerk Shelby County, AL** 05/04/2018 01:06:01 PM **\$41.75 CHERRY** 20180504000152790 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) covers as-extracted collateral is filed as a fixture filing covers timber to be cut 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): SONYA MOORE County: SHELBY, AL APN: 13-7-25-4-000-011-018 Census Tract / Block: 303.41 / 1 133 TIMBERLEAF CIRCLE Township-Range-Sect: 20-3W-25 Subdivision: TIMBERLEAF Alabaster, AL 35007 TWNHMS Legal Book/Page: 21-31 Legal Lot: 16 School District: 2 School District Name: SHELBY COUNTY SCHOOL DISTRICT Neighbor Code: EB6 Munic/Township: ALABASTER

17. MISCELLANEOUS: