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## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS	
A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141	
B. E-MAIL CONTACT AT FILER (optional)  CLS-CTLS_Glendale_Customer_Service@wolte	erskluwer.com
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	26405 - RENASANT
Lien Solutions P.O. Box 29071	63976457
Glendale, CA 91209-9071	ALAL FIXTURE
File with: Shelby, AL	
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1) name will not fit in line 1b, leave all of item 1 blank, check here	b) (use exact, full name; do not omit and provide the Individual Debt
1a. ORGANIZATION'S NAME	

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	THE AB	OVE SPACE IS F	OR FILING OFFICE U	SE ONLY
File with: Shelby, AL  DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b	<del>-,</del>			
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	UCC1Ad)
1a. ORGANIZATION'S NAME				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MCCRANIE	GREY			
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
305 TANYARD RD	HARPERSVILLE	AL	35078	USA
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b		• •	• • •	
name will not fit in line 2b, leave all of item 2 blank, check here [ 2a. ORGANIZATION'S NAME	and provide the Individual Debtor information in item	10 of the Financing Sta	atement Addendum (Form	UCC1Ad)
Za. ORGANIZATION S NAIVIE				
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
•				
SECURED PARTY'S NAME (or NAME of ASSIGNEE of AS	SSIGNOR SECURED PARTY): Provide only one. Secure	ed Party name (3a or 3	h)	
3a. ORGANIZATION'S NAME	CONTROL OF COURT AND AND AND AND COURT	ou larty marrie (ou or o		
Renasant Bank				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
			,	
				and the second s
. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
513 Pelham Pkwy	Pelham	STATE	POSTAL CODE 35124	COUNTRY
COLLATERAL: This financing statement covers the following control of the foregoing is now existing or hereafted including all entitlements, rights to payment overnmental agricultural diversion programs, govern d any other such program of the United States Dep	Pelham collateral: gibles, Crops and Farm Products; whether an after raised or grown; all accessions, additions at, and payments, in whatever form received, in mental agricultural assistance programs, the	AL  y of the foregoing, replacements, a including but not learn Services Ag	is owned now or accord substitutions relations imited to, payments upency Wheat Feed G	USA uired later; ng to any of inder any rain Program
Solution and the control of the control of the following of the foregoing is now existing or hereaf regoing (including all entitlements, rights to payment of the foregoing diversion programs, govern the foregoing of the United States Departmental agricultural diversion programs, govern the dany other such program of the United States Department to any of the foregoing  Somplete only when filing with the Judge of Probate: the initial indebtedness secured by this financing state ortgage tax due (\$.15 per \$100.00 or fraction thereof the control of the foregoing one box:  Check only if applicable and check only one box:  Check only if applicable and check only one box:  Public-Finance Transaction  Manufactured-Home	Pelham  collateral: gibles, Crops and Farm Products; whether an offer raised or grown; all accessions, additions and payments, in whatever form received, in mental agricultural assistance programs, the partment of Agriculture, or any other general interest is \$20,280.25 of) \$30.45  The left in a Trust (see UCC1Ad, item 17 and Instructions	ay of the foregoing, replacements, a including but not larger from Services Agentangibles or progress) being administed 6b. Check only	is owned now or accord substitutions relations in the control of t	ng to any of inder any rain Program any kind

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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 MCCRANIE 2013/030 2/2 \$62.45 Shelby Cnty Judge of Probate, AL FIRST PERSONAL NAME 05/09/2018 08:30:53 AM FILED/CERT **GREY 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 SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) POSTAL CODE COUNTRY 10c. MAILING ADDRESS CITY STATE ADDITIONAL SECURED PARTY'S NAME ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) **SUFFIX** FIRST PERSONAL NAME 11c. MAILING ADDRESS COUNTRY POSTAL CODE STATE CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) covers timber to be cut covers as-extracted collateral is filed as a fixture filing 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): 2305 TANYARD ROAD HARPERVILLE, AL 35078 2305 TANYARD ROAD State: AL HARPERVSVILLE, AL 35078

Prepared by Lien Solutions, P.O. Box 29071, Glendale, CA 91209-9071 Tel (800) 331-3282

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17. MISCELLANEOUS: 63976457-AL-117 26405 - RENASANT BANK

Renasant Bank

File with: Shelby, AL