UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) LAQUITA YOUNG-WILLIAMS B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) SPIRE ALABAMA INC 2101 6TH AVE N BIRMINGHAM, AL. 35203	3200 7.35 39.35	201805110001634 Shelby Cnty Jud 05/11/2018 01:2	70 1/2 \$39.35 ge of Probate, AL 5:07 PM FILED/CERT	
DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use only one Debtor name)		_	R FILING OFFICE USE	
	d provide the Individual Debtor information in ite			
OR 16. INDIVIDUAL'S SURNAME STRICKLAND	FIRST PERSONAL NAME JAMES	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
1c MAILING ADDRESS 108 SOUTHVIEW TERRACE	BIRMINGHAM	STATE	POSTAL CODE 35244	COUNTRY
2b INDIVIDUAL'S SURNAME 2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN 3a ORGANIZATION'S NAME	CITY OR SECURED PARTY). Provide only one Secu	STATE	POSTAL CODE	COUNTRY
SPIRE ALABAMA INC 36 INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c MAILING ADDRESS 2101 6TH AVE N	BIRMINGHAM,	STATE	POSTAL CODE 35203	COUNTRY
4. COLLATERAL: This financing statement covers the following collater LENNOX SPLIT SYSTEM M# ML180UH070P36A55 S# 1717J25982 M# C35-36A-2F-1 S# 6017H54383	al de la companya de			
6a. Check only if applicable and check only one box:	in a Trust (see UCC1Ad, item 17 and Instruction	6b. Check <u>only</u>	ered by a Decedent's Person if applicable and check <u>only</u> iltural Lien Non-UCC	one box
7. ALTERNATIVE DESIGNATION (if applicable). Lessee/Lessor				nsee/Licensor

Consignee/Consignor

Seller/Buyer

7. ALTERNATIVE DESIGNATION (if applicable).

8. OPTIONAL FILER REFERENCE DATA:

Lessee/Lessor

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9a ORGANIZATION'S NAME						
	<u></u>					
96 INDIVIDUAL'S SURNAME	20180511000163470 2/2 \$39.35 Shelby Cnty Judge of Probate: AL					
STRICKLAND						
FIRST PERSONAL NAME			05/11/2018	_		
JAMES						
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
H			THE ABOVE SPACE IS FOR FILING OFFICE USE ONL			
DEBTOR'S NAME: Provide (10a or 10b) only one additional I			ne 1b or 2b of the Finan	icing Statement (I	Form UCC1) (use	exact, full r
do not omit, modify, or abbreviate any part of the Debtor's name)	and enter the mailing addr	ess in line 10c				
10a ORGANIZATION'S NAME						
10b INDIVIDUAL'S SURNAME	· · · · · · · · · · · · · · · · · · ·					
INDIVIDUAL'S FIRST PERSONAL NAME	<u>. </u>		· · · · · · · · · · · · · · · · · · ·			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			<u></u>			SUFFIX
MAILING ADDRESS	TCITY		ST	ATE POSTAL	CODE	COUNT
INCHEING ADDITEDO	0,,,,				•••	
ADDITIONAL SECURED PARTY'S NAME OF	ZI ASSIGNOR SEC	URED PARTY'S	NAME: Provide only	one name /11a o	r 11b)	
11a ORGANIZATION'S NAME	V AGGICITOR OLO	OKED I AKT I C	THE TOTAL ONLY	<u>ono</u> name (17a o		
MYERS COMFORT SPECIALIST	Г - BIRMINGI	HAM				
116 INDIVIDUAL'S SURNAME	FIRST PE	RSONAL NAME	AD	DITIONAL NAME	(S)/INITIAL(S)	SUFFIX
						1
MAILING ADDRESS	CITY		ST	ATE POSTAL	CODE	COUNT
MAILING ADDRESS 60 COMMERCE PKWY	CITY PEL	HAM	Ι΄.	ATE POSTAL AL 3512	_	4
MAILING ADDRESS 60 COMMERCE PKWY ADDITIONAL SPACE FOR ITEM 4 (Collateral).		HAM	Ι΄.	ATE POSTAL 3512	_	US
60 COMMERCE PKWY		HAM	Ι΄.	_	_	1
ADDITIONAL SPACE FOR ITEM 4 (Collateral). This FINANCING STATEMENT is to be filed [for record] (or re	ecorded) in the 14. This 6	INANCING STATEM	ENT.	L 3512	4	US
ADDITIONAL SPACE FOR ITEM 4 (Collateral). This FINANCING STATEMENT is to be filed [for record] (or received and address of a RECORD OWNER of real estate described.	ecorded) in the 14. This 6		ENT.	L 3512	_	US
ADDITIONAL SPACE FOR ITEM 4 (Collateral). This FINANCING STATEMENT is to be filed [for record] (or recent applicable)	ecorded) in the 14. This formation item 16 16. Description 18 Second 108 Seco	INANCING STATEM	ENT. t covers as-extra	L 3512	4	US