

C. SEND ACKNOWLEDGMENT TO: (Name and Address) Spire Alabama, Inc. 2101 6th Avenue North Birmingham, AL 35203	37.70	20180514000165 Shelby Cnty Ju 05/14/2018 10:2	070 1/2 \$37.70 dge of Probate, AL	
A. NAME & PHONE OF CONTACT AT FILER (optional) Jacqueline Cox B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) Spire Alabama, Inc. 2101 6th Avenue North		20180514000168 Shelby Cnty Ju 05/14/2018 10:2	070 1/2 \$37.70 dge of Probate, AL	
Jacqueline Cox B. E-MAIL CONTACT AT FILER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address) Spire Alabama, Inc. 2101 6th Avenue North		20180514000168 Shelby Cnty Ju 05/14/2018 10:	5070 1/2 \$37.70 dge of Probate, AL 26:26 AM FILEDIA	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) Spire Alabama, Inc. 2101 6th Avenue North		2018051400016t Shelby Cnty Ju 05/14/2018 10:	5070 1/2 \$37.70 dge of Probate, AL 26:26 AM FILED/C	
Spire Alabama, Inc. 2101 6th Avenue North		05/14/2018 10:	26:26 AM FILED (25)	• ei1
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2101 6th Avenue North				
Birmingham, AL 35203				
1	,			
<u></u>	THE AB	SOVE SPACE IS FO	R FILING OFFICE USE	ONLY
DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (unique will not fit in line 1b, leave all of item 1 blank, check here	se exact, full name; do not omit, modify, or abbreviate	any part of the Debtor	's name); if any part of the Ir	ndividual Debtor
1a. ORGANIZATION'S NAME	<u> </u>			
DR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Paterson	Johnnie			
c. MAILING ADDRESS 2510 Elizabeth Dr	Pelham	STATE	POSTAL CODE 35124	COUNTRY
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (u	se exact, full name; do not omit, modify, or abbreviate	any part of the Debtor	 's name); if any part of the tr	ndividual Debtor
name will not fit in line 2b, leave all of item 2 blank, check here				
2a. ORGANIZATION'S NAME				
OR	TEIDOT DEDOCULL NAME	A DDITIC	ALAL MARKETCHANTIAL (C)	ieneerv
2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASS	IGNOR SECURED PARTY). Provide only one Secure	of Party name (3a or 3t	>)	
3a. ORGANIZATION'S NAME				
Spire Alabama, Inc.	EIRCT DERCONAL NAME	TADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/NOT AL(S)	SOFFIX
Sc. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2101 6th Avenue North	Birmingham	AL	35203	US
4. COLLATERAL: This financing statement covers the following colla	ateral:	· · · · ·		
Rheem HVAC System				
M# R801SA100521MSA S# W291717930				
### DO O O				
\$3800.00				
i. Check only if applicable and check only one box: Collateral is The	eld in a Trust (see UCC1Ad, item 17 and Instructions)	being administe	ered by a Decedent's Person	al Representati
	eld in a Trust (see UCC1Ad, item 17 and Instructions)		ered by a Decedent's Person if applicable and check <u>only</u>	
5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral ish 5a. Check <u>only</u> if applicable and check <u>only</u> one box. Public-Finance Transaction Manufactured-Home Tra		6b. Check only		one box:

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9a. ORGANIZATION'S NAME	· • ·			 .		
OF INDIVIDUALIS SUBMANE			S	helby	Onty Judge of Pro	obate, AL
9D. INDIVIDUAL'S SURNAME			0	5/14/2	018 10:26:26 AM F	FILED/CERT
Paterson FIRST DERSONAL NAME						
Johnnie						
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
			THE ABOVE	edace :	e con ell inic occio	E LIGE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only	one additional Debtor name or l	Debtor name that did not fit in			tatement /Form HCC1\ (u	
do not omit, modify, or abbreviate any part of the [Tille ID OF 20 OF LITE FI	manding 5	uatement (Form OCCT) (B	SC GARCE, IUII 118
10a. ORGANIZATION'S NAME						
10b INDIVIDUAL'S SURNAME						
					·-···	
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIA	AL(S)					SUFFIX
MAILING ADDRESS		CITY		CTATE	POSTAL CODE	COUNTR
MAILING ADDRESS		CIT		STATE	POSTAL CODE	COONTR
ADDITIONAL SECURED PARTY'S N	· · · · · · · · · · · · · · · · · · ·	R SECURED PARTY		<u> </u>	<u> </u>	
Country Boyz Heating and 11b INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
Country Boyz Heating and 11b INDIVIDUAL'S SURNAME MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTR
Country Boyz Heating and 11b INDIVIDUAL'S SURNAME MAILING ADDRESS						
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Country Boyz Heating and 11b INDIVIDUAL'S SURNAME MAILING ADDRESS 63 Village Pkwy		CITY		STATE	POSTAL CODE	COUNTR
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Country Boyz Heating and 11b INDIVIDUAL'S SURNAME MAILING ADDRESS 63 Village Pkwy		CITY		STATE	POSTAL CODE	COUNTR
Country Boyz Heating and The Individual's Surname MAILING ADDRESS 63 Village Pkwy ADDITIONAL SPACE FOR ITEM 4 (Collaters)	al):	CITY	MENT:	STATE	POSTAL CODE	COUNTR
Country Boyz Heating and The Individual's Surname MAILING ADDRESS 63 Village Pkwy ADDITIONAL SPACE FOR ITEM 4 (Collaters)	al):	Helena	()	STATE	POSTAL CODE 35080	COUNTR
Country Boyz Heating and 11b INDIVIDUAL'S SURNAME MAILING ADDRESS 63 Village Pkwy ADDITIONAL SPACE FOR ITEM 4 (Collaters This FINANCING STATEMENT is to be filed [1] REAL ESTATE RECORDS (if applicable) Name and address of a RECORD OWNER of real of the second of th	for record] (or recorded) in the	Helena 14. This FINANCING STATE	cut covers as-e	STATE	POSTAL CODE 35080	COUNTR
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