JCC FINANCING STATEME		T					
OLLOW INSTRUCTIONS (front and back) (A. NAME & PHONE OF CONTACT AT FILE)			7				
LYOUNG-WILLIAMS	and Addr-on		[
SEND ACKNOWLEDGMENT TO: (Name	and Address)	_	_				
SPIRE ALABAMA INC							
FORMERLY ALABAMA	GAS CORPORATION				0		
2101 6TH AVE N BIRMINGHAM, AL 35203		20180524000181 Shelby Coty Jud			160 1/1 \$.00 dge of Probate, AL		
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I			4				
<u></u>			THE ABOVE	SPACE IS	FOR FILING OFFICE U	SE ONLY	
INITIAL FINANCING STATEMENT FILE #			,	This FINANCING STATEMI to be filed [for record] (or re			
20151027000374130				1141	REAL ESTATE RECORDS		
TERMINATION: Effectiveness of the Final			سسين سيد و سدد و سدد و	_			
. CONTINUATION: Effectiveness of the P continued for the additional period provided	_	e wiin respect to	security interest(s) of the Sect	ijeu Party a	dinorizing this Continuation	Statement is	
ASSIGNMENT (full or partial): Give name	e of assignee in item 7a or 7b and ad	idress of assign	ee in item 7c; and also give name	e of assigno	r in item 9		
AMENDMENT (PARTY INFORMATION):	This Amendment affects Debt	tor <u>or</u> Sec	ured Party of record. Check onl	y <u>one</u> of the	se two boxes.		
Also check <u>one</u> of the following three boxes <u>and</u>			□ DELETE name: Give record n	ama 🗖	ADD name: Complete iten	a 7a or 7b. and also	
CHANGE name and/or address: Give current name (if name change) in item 7a or 7b and/	or new address (if address change) i	in item 7c	to be deleted in item 6a or 6b.		item 7c; also complete iten		
6a. ORGANIZATION'S NAME							
R 66 INDIVIDUAL'S LAST NAME	i		DOIM	LE NAME	SUFFIX		
BARNES		JAMES		E	E		
. CHANGED (NEW) OR ADDED INFORMATION TO THE CONTRACTOR OF THE CONT	DN:						
.5							
75. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDD	MIDDLE NAME SUFF		
MAILING ADDRESS		CITY		STAT	E POSTAL CODE	COUNTRY	
: MAILING ADDRESS 36 KENTWOOD WAY		ALABASTER		AL	35007	US	
ADD'L INFO RE	7e TYPE OF ORGANIZATION		TON OF ORGANIZATION		RGANIZATIONAL ID#, if a		
ORGANIZATION ' DEBTOR				ļ		□NC	
AMENDMENT (COLLATERAL CHANGE)) check only <u>one</u> box.	<u> </u>				7 1-0	
Describe collateral deleted or added,	•	description, or	describe collateral assigne	ed			
<u> </u>							
				•		zed by a Debtor whic	
adds collateral or adds the authorizing Debtor, o				•		red by a Debtor whic	
adds collateral or adds the authorizing Debtor, of Sa. ORGANIZATION'S NAME	or if this is a Termination authorized by	y a Debtor, chec	k here and enter name of C	•		ed by a Debtor whic	
	or if this is a Termination authorized by	y a Debtor, chec	k here and enter name of C	EBTOR au		red by a Debtor which	