

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

|                                                                                                                                                          |
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| A. NAME & PHONE OF CONTACT AT FILER [optional]<br>DANELLE KING 205-326-8299                                                                              |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address)<br><br>SPIRE ALABAMA INC<br>FORMERLY ALABAMA GAS CORPORATION<br>2101 6TH AVE NORTH<br>BIRMINGHAM, AL 35203 |



20180607000200720 1/1 \$.00  
Shelby Cnty Judge of Probate, AL  
06/07/2018 10:08:23 AM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

|                                                             |                                                                                                                                                     |
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| 1a. INITIAL FINANCING STATEMENT FILE #<br>20131018000415070 | 1b. This FINANCING STATEMENT AMENDMENT is to be filed (for record) (or recorded) in the REAL ESTATE RECORDS.<br><input checked="" type="checkbox"/> |
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| 2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.                                            |
| 3. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law. |

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| 4. <input type="checkbox"/> ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9. |
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| 5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes.<br>Also check <u>one</u> of the following three boxes and provide appropriate information in items 6 and/or 7.<br><input type="checkbox"/> CHANGE name and/or address. Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c.<br><input type="checkbox"/> DELETE name. Give record name to be deleted in item 6a or 6b.<br><input type="checkbox"/> ADD name. Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable). |
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| 6. CURRENT RECORD INFORMATION:       |                    |                  |        |
| 6a. ORGANIZATION'S NAME              |                    |                  |        |
| OR                                   |                    |                  |        |
| 6b. INDIVIDUAL'S LAST NAME<br>RAWDEN | FIRST NAME<br>ERIC | MIDDLE NAME<br>F | SUFFIX |

|                                                |                |                                                                  |                      |
|------------------------------------------------|----------------|------------------------------------------------------------------|----------------------|
| 7. CHANGED (NEW) OR ADDED INFORMATION:         |                |                                                                  |                      |
| 7a. ORGANIZATION'S NAME                        |                |                                                                  |                      |
| OR                                             |                |                                                                  |                      |
| 7b. INDIVIDUAL'S LAST NAME                     | FIRST NAME     | MIDDLE NAME                                                      | SUFFIX               |
| 7c. MAILING ADDRESS<br>103 CHESTNUT FOREST CIR | CITY<br>HELENA | STATE<br>AL                                                      | POSTAL CODE<br>35080 |
| 7d. JURISDICTION OF ORGANIZATION               |                | 7e. ORGANIZATIONAL ID #, if any                                  |                      |
| 7f. TYPE OF ORGANIZATION<br>DEBTOR             |                | 7g. ORGANIZATIONAL ID #, if any<br><input type="checkbox"/> NONE |                      |

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| 8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box.<br>Describe collateral: <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned |
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| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment. |            |             |        |
| 9a. ORGANIZATION'S NAME<br>SPIRE ALABAMA INC FORMERLY ALABAMA GAS CORPORATION                                                                                                                                                                                                                                                                                 |            |             |        |
| OR                                                                                                                                                                                                                                                                                                                                                            |            |             |        |
| 9b. INDIVIDUAL'S LAST NAME                                                                                                                                                                                                                                                                                                                                    | FIRST NAME | MIDDLE NAME | SUFFIX |

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| 10. OPTIONAL FILER REFERENCE DATA |
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