UCC FINANCING STATEMENT FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional)					
L. YOUNG-WILLIAMS				6 %	
B. E-MAIL CONTACT AT FILER (optional)	20180917000333180 1/2 \$37.70 Shelby Cnty Judge of Probate, AL 09/17/2018 01:41:10 PM FILED/CERT				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
SPIRE ALABAMA		09/17/20	018 01:41	:10 PM FILED/CERT	
2101 6TH NORTH	' 1				
BIRMINGHAM, AL 35203					
	1				
		THE ABOVE SE	PACE IS FO	R FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exa	ect, full name; do not omit, m		· · · · · · · · · · · · · · · · · · ·		
	rovide the Individual Debtor	information in item 10 of the	Financing St	atement Addendum (Form U	ICC1Ad)
1a. ORGANIZATION'S NAME					
OR 15 INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
MOWERY	NORMAN	Ŋ	F	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
128 LONGFEATHER LN	ALABAS	ΓER	AL	35007	US
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use examame will not fit in line 2b, leave all of item 2 blank, check here and personal or an area of the personal or area of the personal or area of the personal or area.  2a. ORGANIZATION'S NAME		odify, or abbreviate any part information in item 10 of the			
OR 2b INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
2 SECURED DARTY'S MANE ( MANE - ARRIGNES - ARRICNES	SECURED BARTY's Provide	do poly and Capyrod Borty o	/2o 2b		
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR 3a. ORGANIZATION'S NAME	SECURED PARTY): Provi	de only <u>one</u> Secured Marty III	ame (sa or se	")	
SPIRE ALABAMA INC					
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	NIT A R.F.	STATE	POSTAL CODE	COUNTRY
2101 6TH AVE N	BIRMING	HAM	AL	35203	US
4. COLLATERAL: This financing statement covers the following collateral:  AMERISTAR CONDENDENSER					
M# M4AC4024C1000AA S# 160720399	ЭМ				
M# CXC0288A1CAA S# 173320614					
\$3,800.00					
·					
	Trust (see UCC1Ad, item 1	, ,	_	red by a Decedent's Person	·
6a. Check <u>only</u> if applicable and check <u>only</u> one box:	na			f applicable and check <u>only</u>	
Public-Finance Transaction Manufactured-Home Transaction  7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	on A Debtor is a Consignee/Consignor	Transmitting Utility Seller/Buyer	<u> </u>	tural Lien Non-UCC	S Filing nsee/Licensor
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor		Therearens are	اللا اللا	"Severation Little	1306/EICE/1301

8. OPTIONAL FILER REFERENCE DATA:

## UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

pecause Individual Debtor name did not fit, check here	<del></del>			
9a ORGANIZATION'S NAME				
·	<del>-</del>	20180917000	333180 2/2 <b>\$</b> 37.70	
On the Burney of Chippelanas		Shelby Cnty	Judge of Probate,	
96 INDIVIDUAL'S SURNAME  MOWERY		097 1772018	01:41:10 PM FILED/(	,EKI
FIRST PERSONAL NAME				
NORMAN	loueeiv			
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ADONE COACE	IS EOD EIL ING OFFICE I	ISE ONI
DEBTOR'S NAME Provide (10a or 10b) only one additional	Debtor name or Debtor name that did not fit in lin		IS FOR FILING OFFICE I Statement (Form UCC1) (use	
do not omit, modify, or abbreviate any part of the Debtor's name)			<u></u>	, <u>-</u>
10a ORGANIZATION'S NAME				
10b INDIVIDUAL'S SURNAME		<u> </u>		
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		<del></del>	<del> </del>	SUFFIX
MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNT
ADDITIONAL SECURED PARTY'S NAME or	Z ASSIGNOR SECURED PARTY'S	NAME: Provide only one n	ame (11a or 11b)	
11a ORGANIZATION'S NAME				
MVED'S COMEODT SDECIALIS	TC OT			
MYER'S COMFORT SPECIALIS		ADDITIO	NAL NAME(S)/INITIAL(S)	ISUFFIX
MYER'S COMFORT SPECIALIS	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11b INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	STATE	POSTAL CODE	COUNT
	FIRST PERSONAL NAME			COUNTI
MAILING ADDRESS  O COMMERCE PKWY  ADDITIONAL SPACE FOR ITEM 4 (Collateral)  This FINANCING STATEMENT is to be filed [for record] (or record)	CITY PELHAM	STATE	POSTAL CODE 35124	COUNT
MAILING ADDRESS  60 COMMERCE PKWY  ADDITIONAL SPACE FOR ITEM 4 (Collateral)  This Financing Statement is to be filed [for record] (or recall estate records (if applicable)	recorded) in the    14. This FINANCING STATEM!	STATE	POSTAL CODE 35124	COUNT
MAILING ADDRESS 60 COMMERCE PKWY ADDITIONAL SPACE FOR ITEM 4 (Collateral)  This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate describe	recorded) in the    14. This FINANCING STATEM!  covers timber to be culled in item 16    16. Description of real estate:	STATE AL  ENT  covers as-extracted	POSTAL CODE 35124	COUNT
MAILING ADDRESS  60 COMMERCE PKWY  ADDITIONAL SPACE FOR ITEM 4 (Collateral)  This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate describe	recorded) in the    14. This FINANCING STATEM!	STATE AL  ENT  covers as-extracted	POSTAL CODE 35124	COUNT
MAILING ADDRESS  60 COMMERCE PKWY  ADDITIONAL SPACE FOR ITEM 4 (Collateral)  This FINANCING STATEMENT is to be filed [for record] (or REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate describe	recorded) in the  14. This FINANCING STATEME covers timber to be cut ed in item 16  16. Description of real estate  128 Longfeather Ln Alabaster, AL 3500' Legal Description: Lot 30	STATE AL	POSTAL CODE 35124	COUNT
MAILING ADDRESS  60 COMMERCE PKWY  ADDITIONAL SPACE FOR ITEM 4 (Collateral)	recorded) in the  14. This FINANCING STATEME  covers timber to be cut ed in item 16  16. Description of real estate  128 Longfeather Ln Alabaster, AL 3500' Legal Description:	STATE AL  covers as-extracted  Page 145 eed Page 0216320 001 001.000	POSTAL CODE 35124	COUNT