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FOLLOW INSTRUCTIONS		UCCCONT 1/1			
A. NAME & PHONE OF CONTACT AT FILER (optional)					
Dana Lardent (205) 874-0320					
B. E-MAIL CONTACT AT FILER (optional)					
dlardent@wallacejordan.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
Wallace, Jordan, Ratliff & Brandt, LLC					
Attn: Dana Lardent					
800 Shades Creek Parkway, Suite 400					
Birmingham, AL 35209					
4- INITIAL ENIANGNIO OTATEMENT EU E NUMBER				OR FILING OFFICE U	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 1999-37486 on 9/7/1999		1b. This FINANCING STATE (or recorded) in the REA			[IOI Tecord]
		Filer: <u>attach</u> Amendment A	· ·	, -	
2. TERMINATION: Effectiveness of the Financing Statement identified at Statement	bove is terminated w	rith respect to the security intere	est(s) of Sec	ured Party authorizing t	his Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a of For partial assignment, complete items 7 and 9 and also indicate affected		_	of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified continued for the additional period provided by applicable law	dabove with respect	to the security interest(s) of Se	cured Party	authorizing this Continu	ation Statement is
Chack one of those two boyes: AND Check	one of these three bo	oxes to:			
OHEGN OHE OF HESE IMO DOMES		address: Complete ADD n	ame: Compl b, <u>and</u> item 7		me: Give record name ed in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Cha			b, <u>and</u> item 7	C Lto be delete	d in item oa or ob
6a. ORGANIZATION'S NAME	ange - provide omy <u>o</u>	name (oa or ob)			
Baker Foods, Inc.					
OR 6b. INDIVIDUAL'S SURNAME	IAL NAME	LADDITIO	NAL NAME(S)/INITIAL(S	S) SUFFIX	
				117 (C 117 (M) C (O)/ 11 11 17 (C (C	
7 CHANCED OD ADDED INFODMATIONS OF THE ARCHIVE DESIGNATION		(7 71) (1 5 11		lie II i i	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME	n Change - provide only <u>o</u>	<u>ne</u> name (7a or 7b) (use exact, full name	e; do not omit, m	lodity, or abbreviate any part o	of the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDO/ (EO FIROTT ERCOTT/ (ETT/ (IVIE					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
					30111
7c. MAILING ADDRESS	ICITY		ISTATE	POSTAL CODE	COUNTRY
70. MAILING ADDRESS			SIAIE	TOSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE	covered collateral	ASSIGN collateral
Indicate collateral:					
		-CO2	•.	led and Recorded ficial Public Records	
			Ju	dge of Probate, Shelby County A erk	labama, County
		* (5 5)	å Sh	elby County, AL /13/2019 02:11:00 PM	
		ZABASI	/ S3	2.00 CHERRY 190313000081390	alling 5. Buy
					3.00
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS	^	rovido only one name (Oc. or Ob.) (asms of Assi	anor if this is an Assians	acnt)
	de name of authorizir	, , , ,	iaille oi Assi	gnor, ii tilis is an Assigni	nent)
9a. ORGANIZATION'S NAME					
Piggly Wiggly Alabama Distributing Con	npany, Inc.				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON		ADDITIO	NAL NAME(S)/INITIAL(S	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:			<u> </u>		
10.01 House Helicitation Data.					