LICC FINANCING STATEMENT ARENDMEN	JT.					
UCC FINANCING STATEMENT AMENDMEN FOLLOW INSTRUCTIONS	4 1					
A. NAME & PHONE OF CONTACT AT FILER (optional) KIMBERLY BAUER (404) 969-4422						
B. E-MAIL CONTACT AT FILER (optional)		7				
kbauer@firstlandmark.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
NATIONAL BANK OF COMMERCE Attn: Kimberly Bauer		20190326000096090 1/1 \$32.00 Shelby Cnty Judge of Probate				
2970 Clairmont Rd, Ste 400		S	helby Cnt 3/26/2019	10:52:08 AM	FILED/	CERT
Atlanta, GA 30329		ı İ				
		THE ABOVE	SPACE IS FO	R FILING OFFICE	USE O	NLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20030815000537480		15. This FINANCING ST (or recorded) in the Filer. attach Amendmen				
2. TERMINATION: Effectiveness of the Financing Statement identified about the Statement	ove is terminated	d with respect to the security in	nterest(s) of Se	cured Party authoriz	ing this T	ermination
3. ASSIGNMENT (full or partial) Provide name of Assignee in item 7a or 7b, <u>and</u> address of Assignee in item 7c <u>and</u> name of Assignor in item 9 For partial assignment, complete items 7 and 9 <u>and</u> also indicate affected collateral in item 8						
4. CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law	above with respe	ect to the security interest(s) of	Secured Party	authorizing this Cor	ntinuation	Statement is
5. PARTY INFORMATION CHANGE:				· · · · · ·		
Check one of these two doxes CHA	<u>ne</u> of these three .NGE name and/o		oname: Compl	ete itemDELETE	name: G	ive record name
This Change affects Debtor or Secured Party of record item 6a or 6b; and item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b						
CURRENT RECORD INFORMATION: Complete for Party Information Cha 6a. ORGANIZATION'S NAME	inge - provide on	iy <u>oņe</u> name (ba or bb)			, , .	
6b. INDIVIDUAL'S SURNAME	FIRST PERSO	ONAL NAME	ADOITIO	NAL NAME(\$)/INITIA	L(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inform 7a ORGANIZATION'S NAME	ation Change - provi	de only <u>one</u> name (7a or 7b) (use exact,	full name, do not o	imit, modify, or abbreviate a	any part of t	ne Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME						
Fouladbakhsh						
INDIVIDUAL'S FIRST PERSONAL NAME	··········	·····		·····		
Moiz						Terrery.
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE		COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: Also	D collateral	DELETE collateral	RESTATE	covered collateral	ΠAS	SIGN collateral
Indicate collateral:	DD Collateral	DELETE Constetat	KESTATE	COVERED CONSTERS		SIGN COllateral
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A If this is an Amendment authorized by a DEBTOR, check here [77] and provide	AMENDMENT:		9b) (name of As	ssignor, if this is an As	ssignment)
9a. ORGANIZATION'S NAME					··· == ·····	
National Bank of Commerce	I = c =		.		=-	1
96 INDIVIDUAL'S SURNAME	FIRST PERSO	ONAL NAME	ADDITIO	NAL NAME(S)/INITIA	L(\$)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:	<u> </u>		. [
400883000/Fouladbakhsh Moiz						