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UCC FINANCING STATEMENT AMEND	MENT				
A. NAME & PHONE OF CONTACT AT FILER (optional)					
Terrie Childress					
B. E-MAIL CONTACT AT FILER (optional)					
terrie@centralstatebank.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	_			1111 21 (11)(1)(1)(1)(1)(1)(1)(1)(1)(1)	
Central State Bank		2019051/	00016000		
Post Office Box 180			71 L V	0 1/1 \$.00	
Calera, Alabama 35040		Ø5/14/28	19 02:07	:44 PM FILED/CERT	
		THE ABOVE S	PACE IS F	OR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20081222000472350		1b. This FINANCING STA (or recorded) in the R		ENDMENT is to be filed (for RECORDS	recordi
				orm UCC3Ad) <u>and</u> provide Debto	
 TERMINATION: Effectiveness of the Financing Statement identification. Statement 	lified above is terminat	ed with respect to the security in	terest(s) of Se	ecured Party authorizing this	Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in ite	m 7a or 7b, and addre	ss of Assignee in item 7c and nar	ne of Assigno	r in item 9	
For partial assignment, complete items 7 and 9 and also indicate			_		
4. CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law	entified above with res	pect to the security interest(s) of	Secured Part	y authorizing this Continuation	on Statement is
5. PARTY INFORMATION CHANGE:	<u>-</u>	<u> </u>		· 	· · · · · · · · · · · · · · · · · ·
	Check one of these thre	e boxes to:			
This Change affects Debtor or Secured Party of record		l/or address: Complete em 7a or 7b <u>and</u> item 7c	name: Compl 7b, <u>and</u> item	ete itemOELETE name: 7cto be deleted in i	
6. CURRENT RECORD INFORMATION: Complete for Party Informa	ation Change - provide (only <u>one</u> name (6a or 6b)			
6a. ORGANIZATION'S NAME					
OR 65. INDIVIDUAL'S SURNAME	FIRST PER	SONAL NAME	ADDITIO	ONAL NAME(S)/INITIAL(S)	SUFFIX
HIGGINBOTHAM	BURN		A		JR
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or P	'arty Information Change - pro	vide only <u>one</u> name (7a or 7b) (use exact, t	full name; do not o	xmit, modify, or abbreviate any part of	f the Debtor's name)
7a. ORGANIZATION'S NAME					
OR 76. INDIVIDUAL'S SURNAME					
70. INDIVIDUALS SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME				 	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	·-··	<u> </u>		 	SUFFIX
				· 	
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
	†			•	\$
				<u> </u>	
COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE	covered collateral A	ASSIGN collater
COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collaterat	DELETE collateral	RESTATE	covered collateral A	ASSIGN collater
	ADD collateral	DELETE collateral	RESTATE	covered collateral A	ASSIGN collater
	ADD collateral	DELETE collateral	RESTATE	covered collateral A	ASSIGN collater
	ADD collaterat	DELETE collateral	RESTATE	covered collateral A	ASSIGN collatera
	ADD collateral	DELETE collateral	RESTATE	covered collateral A	ASSIGN collatera
	ADD collaterat	DELETE collateral	RESTATE	covered collateral A	ASSIGN collatera
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING	THIS AMENDMEN	T: Provide only <u>one</u> name (9a or 9			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and		T: Provide only <u>one</u> name (9a or 9			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and 9a. ORGANIZATION'S NAME	THIS AMENDMEN	T: Provide only <u>one</u> name (9a or 9			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and	THIS AMENDMENT	T: Provide only <u>one</u> name (9a or 9	b) (name of A		ASSIGN collatera
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and 9a. ORGANIZATION'S NAME CENTRAL STATE BANK	THIS AMENDMENT	T: Provide only <u>one</u> name (9a or 9 orizing Debtor	b) (name of A	ssignor, if this is an Assignmen	nt)
P. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and 9a. ORGANIZATION'S NAME CENTRAL STATE BANK	THIS AMENDMENT	T: Provide only <u>one</u> name (9a or 9 orizing Debtor	b) (name of A	ssignor, if this is an Assignmen	nt)