

NAME & PHONE OF CONTACT AT FILER (optional) L.YOUNG-WILLIAMS				
3. SEND ACKNOWLEDGMENT TO: (Name and Address)	· · ·			
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		201905200 Shelby Co	00172740 1/1 \$.0 ty Judge of Prob	0
SPIRE ALABAMA INC			9 01:54:04 PM FI	
FORMERLY ALABAMA GAS CORPORATIO)N			
2101 6TH AVE NORTH				
BIRMINGHAM, AL 35203				
	THE ABOVE S	SPACE IS FO	R FILING OFFICE US	SE ONLY
a. INITIAL FINANCING STATEMENT FILE #			s FINANCING STATEME	
20160309000076870		to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.		
TERMINATION: Effectiveness of the Financing Statement identified above	re is terminated with respect to security interest(s) of t	the Secured Pa	rty authorizing this Termin	ation Statement.
CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law.	above with respect to security interest(s) of the Security	ired Party auth	orizing this Continuation (Statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b an	nd address of assignee in item 7c; and also give name	e of assignor in	item 9.	
. AMENDMENT (PARTY INFORMATION): This Amendment affects	Debtor or Secured Party of record. Check only	y <u>one</u> of these	two boxes.	····
Also check one of the following three boxes and provide appropriate information is	in items 6 and/or 7.			
CHANGE name and/or address: Give current record name in item 6a or 6b; a name (if name change) in item 7a or 7b and/or new address (if address change)	also give new DELETE name: Give record on the deleted in item 6a or 6b.		DD name: Complete item m 7c; also complete item:	
CURRENT RECORD INFORMATION:				
6a. ORGANIZATION'S NAME				
R CE (NOW (COLLASSE) A CET NAME		Luioni e	Tinhar	Tourne
DB. INDIVIDUAL S LAST NAME	FIRST NAME	MIDDLE NAME		SUFFIX
WEBER	ALBERT	L		
CHANGED (NEW) OR ADDED INFORMATION:				
7a. ORGANIZATION'S NAME				
		·-· ···	NAME	SUFFIX
75. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE		•
75. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE		
76. INDIVIDUAL'S LAST NAME	FIRST NAME	STATE	POSTAL CODE	COUNTRY
c. MAILING ADDRESS			POSTAL CODE	
c. MAILING ADDRESS	CITY	STATE	1	US
c. MAILING ADDRESS 168 CHESTNUT LN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	CITY HELENA	STATE	35080	US
c. MAILING ADDRESS 168 CHESTNUT LN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	CITY HELENA	STATE	35080	US
c. MAILING ADDRESS 168 CHESTNUT LN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	CITY HELENA 7f. JURISDICTION OF ORGANIZATION	STATE AL 7g. ORG	35080	US
c. MAILING ADDRESS 168 CHESTNUT LN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box.	CITY HELENA 7f. JURISDICTION OF ORGANIZATION	STATE AL 7g. ORG	35080	US
c. MAILING ADDRESS 168 CHESTNUT LN ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box.	CITY HELENA 7f. JURISDICTION OF ORGANIZATION	STATE AL 7g. ORG	35080	US
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C. MAILING ADDRESS 68 CHESTNUT LN	CITY HELENA 7f. JURISDICTION OF ORGANIZATION ateral description, or describe collateral assignment of assignment	STATE AL 7g. ORG	SANIZATIONAL ID#, if and an an Amendment authorize	y NONE
C. MAILING ADDRESS ADD'L INFO RE ORGANIZATION ORGANIZATION ORGANIZATION OBSTOR AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collar restated collar added.	CITY HELENA 7f. JURISDICTION OF ORGANIZATION ateral description, or describe collateral assignment of assignment	STATE AL 7g. ORG	SANIZATIONAL ID#, if and an an Amendment authorize	y NONE
C. MAILING ADDRESS 168 CHESTNUT LN ADD'L INFO RE ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION OBSTOR C. MAILING ADDRESS AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collar restated collar restated collar added.	CITY HELENA 7f. JURISDICTION OF ORGANIZATION atera) description, or describe collateral assign AMENDMENT (name of assignor, if this is an Assignated by a Debtor, check here and enter name of E	STATE AL 7g. ORG	SANIZATIONAL ID#, if and an an Amendment authorize	y NONE
ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box. Describe collateral deleted or added, or give entire restated collar NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A adds collateral or adds the authorizing Debtor, or if this is a Termination authorize	CITY HELENA 7f. JURISDICTION OF ORGANIZATION atera) description, or describe collateral assign AMENDMENT (name of assignor, if this is an Assignated by a Debtor, check here and enter name of E	STATE AL 7g. ORG	SANIZATIONAL ID #, if an orizing this Amendment	y NONE

10 OPTIONAL FILER REFERENCE DATA