

Shelby Cnty Judge of Probate, AL 06/04/2019 11:16:03 AM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Beth O'Neill (205) 254-1000 B. E-MAIL CONTACT AT FILER (optional) boneill@maynardcooper.com C. SEND ACKNOWLEDGEMENT TO: (Name and Address) Beth O'Neill Maynard, Cooper & Gale, P.C. 1901 Sixth Avenue North 2400 Regions Harbert Plaza Birmingham, Alabama 35203 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Inst #20180322000095510 (Shelby County) Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in Item 13 TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement ASSIGNMENT (full or partial): Provide name of Assignee in Item 7a or 7b and address of Assignee in Item 7c and name of Assignor in Item 9. For partial assignment, complete Items 7 and 9 and also indicate effected collateral in Item 8 CONTINUATION. Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law AND Check one of these three boxes to: PARTY INFORMATION CHANGE: CHANGE name and/or address: Complete 🛛 ADD name: Complete Item 🔝 DELETE name: Check one of these two boxes: Give record name Secured Party of record This change affects: Debtor or 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 Change – provide only one name (6a or 6b). 6a. ORGANIZATION'S NAME OR ADDITIONAL NAME(S) SUFFIX FIRST PERSONAL NAME 6b. INDIVIDUAL'S SURNAME INITIAL(S) 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change – provide only one name (7a or 7b) (use exact full name; do not omit, modify or abbreviate any part of the Debtor's name). 7a. ORGANIZATION'S NAME Coalmont Resources LLC 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME SUFFIX INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) POSTAL CODE COUNTRY 7c. MAILING ADDRESS STATE CITY CO USA 80202 1400 Sixteenth Street, Suite 200 Denver DELETE collateral RESTATE collateral ADD collateral ASSIGN collateral 8. COLLATERAL CHANGE: Also check only one of these four boxes: Indicate collateral: 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b)(name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME Resource Capital Fund VI L.P. OR SUFFIX ADDITIONAL NAME(S)/INITIAL(S) FIRST PERSONAL NAME 9b INDIVIDUAL'S SURNAME 10. OPTIONAL FILER REFERENCE DATA (a) TO BE FILED WITH: Shelby County, Alabama; (b) Project Name: RCF / MCG File #15631-0003 International Association of Commercial Administrators (IACA) FILING OFFICE COPY - UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)