

UCC FINANCING STATEMENT AMENDME FOLLOW INSTRUCTIONS	NT				
A. NAME & PHONE OF CONTACT AT FILER (optional)					
S WASHINGTON B. E-MAIL CONTACT AT FILER (optional)			n	9 & LL 0 1 9 B B B B B L LL 11 1 0 B B L	IL 1 190 BA B 190 A B B
C. SEND ACKNOWLEDGMENT TO: (Name and Address)			6 1 - 11- · ·	8000241780 1/1 Cnty Judge of F	ropate; n-
SPIRE ALABAMA 2101 6TH AVE NORTH			07/08/2	2019 11:43:08 AT	FILED/CERT
BIRMINGHAM, AL 35203					
1,	1				
				R FILING OFFICE US	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20150924000334790	1	b. This FINANCING STATE (or recorded) in the REA	MENT AME	NDMENT is to be filed RECORDS	(for record)
2. TERMINATION: Effectiveness of the Financing Statement identified a Statement	bove is terminated w	Filer: <u>attach</u> Amendment Ad th respect to the security interes			
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a of For partial assignment, complete items 7 and 9 and also indicate affects		-	of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified			cured Party	authorizing this Continu	uation Statement is
continued for the additional period provided by applicable law					
5. PARTY INFORMATION CHANGE: AND Check one of these two boxes: Check one of these two boxes: CHANGE name and/or address: Complete — ADD name: Complete item — DELETE name: Give record name					
This Change affects Debtor <u>or</u> Secured Party of record iter	IANGE name and/or a m 6a or 6b; <u>and</u> item 7	a or 7b <u>and</u> item 7c7a or 7t	ame: Comple o, <u>and</u> item 7	to be deleted	ne: Give record name I in item 6a or 6b
CURRENT RECORD INFORMATION: Complete for Party Information Cl Ga. ORGANIZATION'S NAME	hange - provide only <u>q</u>	ne name (6a or 6b)			
6b. INDIVIDUAL'S SURNAME CARRILLO	RICARI	_	ADDITIO	NAL NAME(S)/INITIAL(S	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info			name; do not or	nit, modify, or abbreviate any p	art of the Debtor's name)
7a. ORGANIZATION'S NAME					
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		, <u></u>			SUFFIX
7- MANUALO ADDOCCO	I CITY		PTATE	TPOSTAL CODE	COUNTRY
7c. MAILING ADDRESS 4841 INDIAN VALLEY RD	BIRMIN	IGHAM	AL	35244	US
	ADD collateral			overed collateral	ASSIGN collateral
Indicate collateral:	_	_			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS	S AMENDMENT: P	rovide only one name (9a or 9b)	(name of As	signor, if this is an Assig	nment)
If this is an Amendment authorized by a DEBTOR, check here and provi	de name of authorizin	•			
9a. ORGANIZATION'S NAME SPIRE ALABAMA, INC FKA ALABAM	IA GAS CO	RPORATION			
OR 9b INDIVIDUAL'S SURNAME	FIRST PERSON		ADDITIO	NAL NAME(S)/INITIAL(S	S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA:					