	EMENT AMENDMEN				
A. NAME & PHONE OF CONTACT CSC 1-800-858-5294					
B. E-MAIL CONTACT AT FILER (op SPRFiling@cscglobal.co	•				
C. SEND ACKNOWLEDGMENT TO	: (Name and Address)				
1681 83698 CSC			20190808	3000286830	
801 Adlai Stevenson Drive Springfield, IL 62703	Filad In	: Alabama	08/08/201	19 01:49:29 PM	
	ı n <del>c</del> u m	(Shelby)	UCC6 1/	<b>'2</b>	
				CE IS FOR FILING OFFICE US	
1a. INITIAL FINANCING STATEMENT FIL 1992-10473 06/05/1992	LE NUMBER	1	(or recorded) in the REAL		-
	of the Financing Statement identified above	e is terminated w		lendum (Form UCC3Ad) <u>and</u> provide De st(s) of Secured Party authorizing th	
Statement					
	Provide name of Assignee in item 7a or 7b items 7 and 9 and also indicate affected co			f Assignor in item 9	
4. CONTINUATION: Effectiveness continued for the additional period	ss of the Financing Statement identified about the state of the Financing Statement identified about the state of the stat	ove with respect	to the security interest(s) of Sec	ured Party authorizing this Continua	ation Statement is
5. PARTY INFORMATION CHAN		<i>c</i> (1	•		
Check <u>one</u> of these two boxes:  This Change affects Debtor <u>or</u>	AND Check one  CHANG  I secured Party of record  Chitage 65			ne: Complete item DELETE name and item 7c to be deleted	e: Give record name
	ION: Complete for Party Information Change			and item 70 Lobe deleted	III Item oa or ob
OR 6b. INDIVIDUAL'S SURNAME SLAUGHTER		FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)  J.	SUFFIX
7. CHANGED OR ADDED INFORMATION'S NAME	ATION: Complete for Assignment or Party Information	on Change - provide o	nly <u>one</u> name (7a or 7b) (use exact, full na	me; do not omit, modify, or abbreviate any pa	rt of the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONA	L NAME				
INDIVIDUAL'S ADDITIONAL NAN	/IE(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS		CITY		STATE POSTAL CODE	COUNTRY
O COLLATEDAL CHANCE: AL-		collateral			7 A COLONI II - 4 - 11 -
8. COLLATERAL CHANGE: Also Indicate collateral: THIS FINANCING STATE EFFECTIVE UNTIL TERM	MENT COVERS A MOBILE	_		SESTATE covered collateral  ORY AND IT REMAINS	」ASSIGN collatera
	LECTION 16' X 76' MOBILE	HOME S/N	J TNFI M26A30308RI	(1) MAGIC CHEF	
	38802785, (1) MAGIC CHE				/I AIR
If this is an Amendment authorized by	OF RECORD AUTHORIZING THIS AND A DEBTOR, check here and provide not a DEBABAMA BANK/CHILTO	ame of authorizin	g Debtor	name of Assignor, if this is an Assign	ment)
ÓP.					
9b. INDIVIDUAL'S SURNAME		FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE	DATA:Debtor:SLAUGHTER, I	DEBRA J.			1691 9360

1681 83698

## 201908080000286830 08/08/2019 01:49:29 PM UCC6 2/2

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 1992-10473 06/05/1992 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME FIRST ALABAMA BANK/CHILTON N/K/A REGIONS BANK Filed and Recorded Official Public Records Judge of Probate, Shelby County Alabama, County 12b. INDIVIDUAL'S SURNAME Clerk Shelby County, AL 08/08/2019 01:49:29 PM S.00 CHERRY alling S. Buyl LABANT 20190808000286830 FIRST PERSONAL NAME SUFFIX ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a. ORGANIZATION'S NAME 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME SUFFIX ADDITIONAL NAME(S)/INITIAL(S) 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): ANY PROCEEDS OF THE ABOVE COLLATERAL 15. This FINANCING STATEMENT AMENDMENT: 17. Description of real estate: covers timber to be cut is filed as a fixture filing covers as-extracted collateral 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):
DEBTOR'S NAME: DEBRA J. SLAUGHTER & DAVID WAYNE SLAUGHTER DEBTOR'S ADDRESS: RT. 1 BOX 360, CALERA, AL 35040 SECURED PARTY'S NAME: FIRST ALABAMA BANK SECURED PARTY'S ADDRESS: P.O. BOX 339, THORSBY, AL 35171

18. MISCELLANEOUS: