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JI W					
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	(
UCC FINANCING STATEMENT AMEND	MENT				
A. NAME & PHONE OF CONTACT AT FILER (optional)		1			
S WASHINGTON					
B. E-MAIL CONTACT AT FILER (optional)					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
SPIRE ALABAMA		20190930000	357310 1/1	\$ 00	
2101 6TH AVE NORTH BIRMINGHAM, AL 35203		OHETDY ONLY	/ Judge of	รเบย Probate, AL M FILED/CERT	
. BIRITINGITANI, ALI 33203	•		00.32:24 P	" FILED/CERT	
		THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER		1b. This FINANCING \$1 (or recorded) in the	TATEMENT AME	NDMENT is to be filed [for	
20140822000264470		Filer: <u>attach</u> Amendme	nt Addendum (For	m UCC3Ad) <u>and</u> provide Debto	·-
2. TERMINATION: Effectiveness of the Financing Statement ident Statement	Ified above is terminated v	vith respect to the security (nterest(s) or Sec	cured Party authorizing this	i eminstion
3. ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate items.			ame of Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law.	<u> </u>		of Secured Party	authorizing this Continuation	on Statement is
5. PARTY INFORMATION CHANGE:					
	Check <u>one</u> of these three be CHANGE name and/or a		D name: Comple	te itemOFLETE came:	Give record name
This Change affects Debtor or Secured Party of record	item 6a or 6b; <u>and</u> item :	7a or 7b <u>and</u> item 7c7a	or 7b, <u>and</u> item 7		
6. CURRENT RECORD INFORMATION: Complete for Party Information. ORGANIZATION'S NAME	ition Change - provide only	one name (oz or ob)			· <u>.</u>
OR 66 INDIVIDUAL'S SURNAME	FIRST PERSON	IAI NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
GILLILAND			\mathbf{W}		
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or P. 7a. ORGANIZATION'S NAME	arty Information Change - provide	only <u>one</u> name (7a or 7b) (use exac	t, full name; do not or	nit, modify, or abbreviate any part o	of the Debtor's name)
7a. ORGANIZATIONS NAME					
7b. INDIVIDUAL'S SURNAME			_ ,		
INDIVIDUAL'S FIRST PERSONAL NAME		· · · · · · · · · · · · · · · · · · ·			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
4164 EAGLE CREST DR	BIRMIN	NGHAM	AL	35242	US
COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral	DELETÉ collateral	RESTATE of	overed collateral	ASSIGN collateral
Trottere constoral.					
A MANG A- ACAURER RAARY BEAARS *******	TINA AMERICAN		. De \		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and	THIS AMENDMENT: F provide name of authorizing		9D) (name of As	signor, if this is an Assignme	ent)
9a. ORGANIZATION'S NAME SPIRE ALABAMA, INC FKA ALAB	AMA CAS CO	RPARATIAN			
OR 96. INDIVIDUAL'S SURNAME	FIRST PERSON		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX

10. OPTIONAL FILER REFERENCE DATA: