

# UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141	
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 30691 - REDBRICK	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	70720848  ALAL FIXTURE
File with: Shelby, AL	



20191004000366840 1/3 \$52.10  
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THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME				
OR	1b. INDIVIDUAL'S SURNAME BROWN	FIRST PERSONAL NAME TERRI	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
1c. MAILING ADDRESS 187 MARLSTONE DRIVE		CITY HELENA	STATE AL	POSTAL CODE 35080-3567
			COUNTRY USA	

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS		CITY	STATE	POSTAL CODE
				COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME REDBRICK FINANCIAL				
OR	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS 1415 28th St Suite 325		CITY West Des Moines	STATE IA	POSTAL CODE 50266
			COUNTRY USA	

4. COLLATERAL: This financing statement covers the following collateral:

(1) AIR CONDITONER AND ALL PROPERTY OF THE DEBTOR OR ANY PARTS OR COMPONENTS INSTALLED IN THE EQUIPMENT, ANY PROCEEDS FROM THE SALE OF THE EQUIPMENT, AND ANY PROCEEDS FROM ANY INSURANCE COVERING THE EQUIPMENT THAT ARE FOR DAMAGE TO OR LOSS OF THE EQUIPMENT

Complete only when filing with the Judge of Probate:  
The initial indebtedness secured by this financing statement is \$7,360.00  
Mortgage tax due (\$.15 per \$100.00 or fraction thereof) \$11.10

5. Check only if applicable and check only one box: Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

70720848

REDBRICK

20191492649

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME

BROWN

FIRST PERSONAL NAME

TERRI

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX



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10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:  
☐ covers timber to be cut ☐ covers as-extracted collateral ☒ is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:  
  
SEE ATTACHED.  
  
SHELBY, AL  
  
303.36 / 3

**Lien Solutions Order #:** 71898215  
**Search Effective Date:** 09/16/2019  
**Address:** 187 Marlstone Drive  
Helena, AL 35080  
**County:** Shelby  
**APN:** 13-5-21-3-004-037-000

**Deed:**

**1). Document Type:** Warranty Deed  
**Grantor:** Virginia S. Hess  
**Grantee:** Iralando Brown and Terri Brown  
**Dated:** 07/08/2016  
**Recorded:** 07/12/2016  
**Instrument #:** 20160712000242040

**Legal Description:**

Legal Description as per last deed of record

Lot 37, according to the Survey of Fieldstone Park 4th Sector, as recorded in Map Book 31, Page 3, in the Probate Office of Shelby County, Alabama.

APN: 13-5-21-3-004-037-000

**Disclaimer:**

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