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UCC FINANC	INC CT	ATERNE.	17
OCC LINAMO		W I E IAI E I.	1 1
FOLLOWINGTOLICS	TIONS		

UCC FINANCING STATEMENT AMENDMENT FOLLOWINSTRUCTIONS	T				
A. NAME & PHONE OF CONTACT AT FILER (optional)					
Wills Brocato (256) 280-9187 B. E-MAIL CONTACT AT FILER (optional)	<u> </u>				
wbrocato@myprogressbank.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				22.6 MA 11 m M (m s 11 m) m s 1	
Progress Bank and Trust PO Box 1905				580 1/1 \$.00 ige of Probate,	AL
Decatur, AL 35602		10/30/20	19 12:3	32:01 PM FILED/C	ERT
				R FILING OFFICE US	
1a. INITIAL FINANCING STATEMENT FILE NUMBER Shelby County #20190314000081790 Pg. 1/1		This FINANCING STATEM (or recorded) in the REAL	ESTATE F	RECORDS	•
2. TERMINATION: Effectiveness of the Financing Statement Identified above Statement	is terminated w	Filer: <u>smedi</u> Amendment Add ith respect to the security interes	بجارا والبراء والمتالي		أبالأمان فالمنطب انصاب مساعات كأدرون بال
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b For partial assignment, complete items 7 and 9 and also indicate affected co		_	f Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement Identified about continued for the additional period provided by applicable law	ove with respect	to the security interest(s) of Sec	ured Party	authorizing this Continu	uation Statement Is
5. PARTY INFORMATION CHANGE:			*		
Check one of these two boxes:	SE name and/or a	ddress: CompleteADD nan	ne: Comple	te item DELETE nan	ne: Give record name
This Change affects Debtor or Secured Party of record item 68	or 6b; <u>and</u> item 7	a or 7b <u>and</u> Item 7c 7a or 7b,	and item 7	to be deleted	in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Change 6a. ORGANIZATIONS NAME	3g - broving pully	one usine (ea craii).			<u> </u>
Eddleman Residential, LLC					
6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S	SUFFIX
7 CHANCED OR ADDED INFORMATIONS (Complete for Assissment or Cost, Information	- Charles assisted			all provide as abbreviate and	and of the Debter's same
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 78. ORGANIZATION'S NAME	on រយុទ្ធមន្តិក - ឯរប់ភេទថ ៩	Sity mie traute (14 or 16) (use exact, full tis	ilis, do tiet di	int' toomit' of apprentate mit h	Sair of the Deptot & Hames
OR 76. INDIVIDUAL'S SURNAME					<u></u>
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUALIS ADDITIONAL NAMEZOVIAUTIALIS	<u> </u>				SLIFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUIFFIX
7c. MAILING ADDRESS	GITY		STATE	POSTAL CODE	COUNTRY
2700 US Hwy 280, Suite 425	Birming	ham	AL	35223	USA
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD	collateral	DELETE collateral	RESTATE	overed collateral	ASSIGN collateral
Indicate collateral:					
		Filed and Recorded Official Public Reco	•		
			helby County	Alabama, County	
		Shelby County, AL 10/30/2019 12:32:0: S.00 CHERRY		_	
	</td <td>20191030000400580</td> <td>)</td> <td>Oli-5.B</td> <td>ay C</td>	20191030000400580)	Oli-5.B	ay C
			<u>,</u> . •		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN If this is an Amendment authorized by a DEBTOR, check here and provide not approved the second			name of As	signor, if this is an Assig	nment)
98. ORGANIZATION'S NAME Progress Bank and Trust					
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIO	NAL NAME(S)/INITTAL(S) SUFFIX
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10. OPTIONAL FILER REFERENCE DATA:	1				