

| FOLLOW INSTRUCTION | NG STATEMENT AMEN ONS | IDMENT | | | | | | , , |
|--|---|----------------------|--|--|------------------------|--|--------------------|------------|
| | F CONTACT AT FILER (optional) ver Lien Solutions Phone: 800-33 | 1-3282 Fax: 8 | 318-662-4141 | | | | | |
| B. E-MAIL CONTACT . uccfilingreturn@ | AT FILER (optional) wolterskluwer.com | | | | | | | |
| C. SEND ACKNOWLE | DGMENT TO: (Name and Address) | 9418 - BB & 1 | Γ - MASTER | | | | | |
| Lien Solutions P.O. Box 290 Glendale, CA | s 71 | 74058 ALAL | 092 | | | | | |
| | | FIXTU | ואלב | | | | | |
| 4 - MUTIAL FINIANIONIO | File with: Shelby, AL | | | <u>. </u> | | S FOR FILING OFFICE | | • |
| | STATEMENT FILE NUMBER 250 7/26/2010 CC AL Shelby | / | | (or recorded) in th | e REAL EST | FAMENDMENT is to be file TATE RECORDS in (Form UCC3Ad) and provide in (Form UCC3Ad). | ed (for record) | in itom 12 |
| 2. X TERMINATION: E Statement | ffectiveness of the Financing Statement in | dentified above is | s terminated with | | | | | |
| | l or partial): Provide name of Assignee in nent, complete items 7 and 9 <u>and</u> also in | | | signee in item 7c <u>and</u> nar | ne of Assign | or in item 9 | | |
| | Effectiveness of the Financing Statement dditional period provided by applicable la | | with respect to the | e security interest(s) of S | Secured Party | authorizing this Continua | tion Statemen | ıt is |
| 5. PARTY INFORMA | TION CHANGE: | · | | | | | | |
| Check one of these two | boxes: | | of these three boxe GE name and/or ac | | DD name: Co | omplete item DELETE n | ame: Give rec | ord name |
| This Change affects | Debtor or Secured Party of record | | | or 7b <u>and</u> item 7c7a | a or 7b, <u>and</u> it | tem 7c to be delet | ed in item 6a o | |
| 6. CURRENT RECORD I | NFORMATION: Complete for Party Inform NAME | mation Change - | provide only <u>one</u> | name (6a or 6b) | <u>.</u> | | | |
| RMD Two, LL | C | | | | | | | |
| 6b. INDIVIDUAL'S SUF | NAME | | FIRST PERSONAL | NAME | ADE | DITIONAL NAME(S)/INITIAL(S) | SUFF | ix |
| 7. CHANGED OR ADDE 7a. ORGANIZATION'S OR 7b. INDIVIDUAL'S SUF | | Party Information Ch | ange - provide only <u>or</u> | name (7a or 7b) (use exact, f | ull name; do not | omit, modify, or abbreviate any pa | rt of the Debtor's | name) |
| 76. INDIVIDUAL S SUR | ANAIVIE | | | | | | | |
| INDIVIDUAL'S FIRS | ST PERSONAL NAME | | | | | <u> </u> | | |
| INDIVIDUAL'S ADD | ITIONAL NAME(S)/INITIAL(S) | _ | <u> </u> | - | | | SUFF | IX |
| 7c. MAILING ADDRESS | | | CITY | _ | STA | ATE POSTAL CODE | COU | NTRY |
| 8. COLLATERAL CH | | boxes: ADE | Collateral | DELETE collateral | REST | ATE covered collateral | ASSIGN | collateral |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | D PARTY OF RECORD AUTHORIZED AUTHORIZED AUTHORIZED BY A DEBTOR, check here | | ENDMENT: Pro | | r 9b) (name d | of Assignor, if this is an Ass | ignment) | |
| 1 | ng and Trust Company | | | | | | | |
| 9b. INDIVIDUAL'S SUF | NAME | | FIRST PERSONA | _ NAME | ADI | DITIONAL NAME(S)/INITIAL(S) | SUFF | :IX |
| 10. OPTIONAL FILER RE | FERENCE DATA: Debtor Name: R | MD Two, LLC | ; | | | | <u> </u> | |
| 74058092 | 8621170 | | | | | Commercial | | |

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 20100726000236250 7/26/2010 CC AL Shelby 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME Branch Banking and Trust Company 12b. INDIVIDUAL'S SURNAME 202003060000088940 2/2 \$.00 FIRST PERSONAL NAME Shelby Cnty Judge of Probate, AL 03/06/2020 09:48:39 AM FILED/CERT ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 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 RMD Two, LLC 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): Debtor Name and Address: RMD Two, LLC - 4515 Southlake Parkway, Suite 101, Birmingham, AL 35244 Secured Party Name and Address: Branch Banking and Trust Company - , , AL 15. This FINANCING STATEMENT AMENDMENT: 17. Description of real estate: covers timber to be cut __ covers as-extracted collateral __ is filed as a fixture filing | See Exhibit "A" 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):

Branch Banking and Trust Company

File with: Shelby, AL

8621170 Commercial

18. MISCELLANEOUS: 74058092-AL-117 9418 - BB & T - MASTER NC