UCC FINANCING S FOLLOWINSTRUCTIONS	STATEMENT AMEN	NDMENI				
A. NAME & PHONE OF CON	TACT AT FILER (optional)					
Anna Margaret Tid						
B. E-MAIL CONTACT AT FILE	• •		N:			
amtidwell@myprog	ressbank.com  NT TO: (Name and Address)		i			
C. SEND ACKNOVLEDGIVIE	NT TO. (IVAINE AND ADDIESS)		2.0	200324	000115910	
Ducawasa Dank and Tuyst			03/24/2020 11:14:36 AM			
Progress Bank an PO Box 1905	REL 1/1					
Decatur, AL 3560	2					
						0.111.17
1a. INITIAL FINANCING STATEM	ENT FILE NUMBER		THE ABOVE S  1b. This FINANCING STA		R FILING OFFICE USE OF NOMENT is to be filed if or	
Shelby County UC	(or recorded) in the REAL ESTATE RECORDS Filer: ລຸປອດງ Amendment Addendum (Form UCC3Ad) <u>and provide Debtor's name in item 1</u>					
	eness of the Financing Statement		Communication of the communica			2000
Statement			*****			
	artial): Provide name of Assignee mplete items 7 and 9 <u>and</u> also indi			me of Assignor	in item 9	
4. CONTINUATION: Effec	cliveness of the Financing Stateme	ent identified above with respec	to the security interest(s) of	Secured Party	authorizing this Continuation	on Statement is
continued for the additiona	al period provided by applicable lav	Ŵ		~~~~~~~~~		
5. PARTY INFORMATION		AND Chack and of these three h	avae ta:			
Check <u>one</u> of these two boxes:  This Change affects Debtor		AND Check <u>one</u> of these three b CHANGE name and/or item 6a or 6b; <u>and</u> item	address: Complete ADD	Diname: Comple or 7b, <u>and</u> item 7c	te itemDELETE name: cto be deleted in i	Give record nam
	RMATION: Complete for Party In			n ro, <u>gila</u> kem r		itani oa oi ob
6a. ORGANIZATION'S NAME		นนนนนนนนนนนนนนนนนนนนนนนนนนนนนนนนนนนนน				······································
Newcastle Cons	<u> </u>	leibar pepaai	1 A 1 B 1 A B 3 F	I ADDITIO	NIAL BLABATION/IBUTIAL (C)	SUFFIX
6b. INDIVIDUAL'S SURNAME		FIRST PERSOI	NAL NAIVIE	ADDITIO	NAL NAME(S)/INITIAL(S)	27 (**) - \$ - 1 \w
7. CHANGED OR ADDED INI	FORMATION: Complete for Assignme	ent or Party Information Change - provide	only <u>one</u> name (7a or 7b) (use સ્થમાની,	full same; do not or	nit, នាមកញ់ស្រុ or abbreviate ចំកម្ គ្រង។ c	of the Debtor's mains
7a ORGANIZATION'S NAME			•		**************************************	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
OR 75 INDIVIDUAL'S SURNAME				i ««««nesesesesesesesesesesesesesesesesese		
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INDIVIDUAL'S FIRST PER	RSONAL NAME					
INDIVIDUAL'S ADDITION	AL NAME(S)/INITIAL(S)	· · · · · · · · · · · · · · · · · · ·				SUFFIX
		CITY	nannanananananananananananananan <del>a (************************************</del>	STATE	POSTAL CODE	COUNTRY
7c. MAILING ADDRESS 121 Bishop Circle		Pelham		AL	35124	USA
		r' — a	DELETE pollotoral			ASSIGN collater
Indicate collateral:	E: <u>Also</u> check <u>one</u> of these four bo	xes: ADD collateral	DELETE collateral	Lame C	covered collateral	ASSIGN Collatel
	nd Recorded					
Official	l Public Records of Probate, Shelby County Alabama, C	`ountv				
Clerk	County, AL	Jounty				
03/24/2	020 11:14:36 AM HERRY					
	24000115910	alling 5. Buyl				
NAME OF SECURED PAI	RTY of RECORD AUTHORIZ		Provide only one name /0e or	9b) (name of Ac	signor, if this is an Assignme	eni)
	zed by a DEBTOR, check here	and provide name of authorizi	-	SET (HEITIE OF MS	orginal in and is all westfilling	
99, ORGANIZATION'S NAME						
Progress Bank a		FIRST PERSO	JAI NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
DD. INDIVIDUAL O OURIVAIVIE		TINST FERSOI				September 1 7 gFT
10. OPTIONAL FILER REFER	ENCE DATA:		***************************************			
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