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. ~-	1a. IN	ITIAL FINANCING STATEMENT FILE#	122000025220 cor	t. 20170110000009010	1b. This FINANCIN	G STATEMENT AMENDMENT I
· •					. REAL ESTATE	
	2. <b>X</b>	TERMINATION: Effectiveness of the Financing		<u> </u>	<u> </u>	
	3: L	CONTINUATION; Effectiveness of the Financial continued for the additional period provided by a	_	with respect to security interest(s) of	of the Secured Party authorizing this (	Continuation Statement is
	4.	ASSIGNMENT (full or partial): Give name of a	assignee in item 7a or 7b and at	Idress of assignee in item 7c; and also	give name of assignor in item 9.	
<b></b>	5, Al	MENDMENT (PARTY INFORMATION): This		- <u>j                                   </u>	Check only <u>one</u> of these two boxes.	
	i i Als	so check <u>one</u> of the following three boxes <u>and</u> provi	ide appropriate information in ite			
· · ·		CHANGE name and/or address: Give current reconname (if name change) in item 7a or 7b and/or ne	ord name in item 6a or 6b; also w address (if address change) i	give new DELETE name: Given item 7c. to be deleted in item	re record name: C n 6a or 6b. Litem 7c; also o	omplete item 7a or 7b, and also complete items 7d-7g (if applicab
	_	URRENT RECORD INFORMATION:				
	. ; . ;   !	6a. ORGANIZATION'S NAME				
	OR	6b. INDIVIDUAL'S LAST NAME:		FIRST NAME	MIDDLE NAME	SUFFIX
• •	· ·	Tibbs		David	G	
, <del></del>	7. C	HANGED (NEW) OR ADDED INFORMATION:				
- <i>-</i>	i. i. [	7a. ORGANIZATION'S NAME				
			* * * * * 1		• • • • • • • • • • • • • • • • • • • •	, ,
	OR -	7b. INDIVIDUAL'S LAST NAME		IFIRST NAME	IMIDDLE NAME :	ISUFFIX :
	ÖR -	76. INDIVIDUAL'S LAST NAME		Lisa	P. 25 E. 7	SUFFIX
	OR -	7b. INDIVIDUAL'S LAST NAME		FIRST NAME Lisa CITY	MIDDLE NAME  P. STATE POSTAL (	CODE
	7c. M	76. INDIVIDUAL'S LAST NAME	· · · · · · · · · · · · · · · · · · ·	Lisa	P. 25 E. 7	CODE COUNTRY
 	7d. T	7b. INDIVIDUAL'S LAST NAME Tibbs HAILING ADDRESS		Lisa	P. STATE POSTAL OF AL 35242  ION 79. ORGANIZATION	COUNTRY US AL ID #, if any
	7d. T	7b. INDIVIDUAL'S LAST NAME Tibbs  AILING ADDRESS  021 Little Ridge Circle  AX ID #: SSN OR EIN   ADD'L INFO RE   7e. T	YPE OF ORGANIZATION	CITY Birmingham 7f. JURISDICTION OF ORGANIZAT	P. STATE POSTAL OF AL 35242  ON 79. ORGANIZATION	COUNTRY US
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## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20120123000025230 cont. 20170110000009010 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

12a. ORGANIZATION'S NAME

Alabama Power Company

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME, SUFFIX

13. Use this space for additional information



Shelby Cnty Judge of Probate, AL 05/07/2020 09:57:23 AM FILED/CERT

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