Shelby

FOLLOW INSTRUCTIONS	IENT				
A. NAME & PHONE OF CONTACT AT FILER (optional)					
B. E-MAIL CONTACT AT FILER (optional)					
LOANS@SPIREENERGY.COM					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					- ::: -::
SPIRE ALABAMA INC					
20 20TH STREET SOUTH BIRMINGHAM, AL 35233		202005	2000020017	0 1/1 \$.00 se of Probate,	
				3:58 AM FILED/	
		THE ABOVE S	SPACE IS FO	R FILING OFFICE	USE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER	•	b. 7 This FINANCING STA	ATEMENT AME	NDMENT is to be file	
20180511000163550		Filer: <u>attach</u> Amendmen	t Addendum (For	m UCC3Ad) <u>and</u> provid	e Debtor's name in item 13
2. TERMINATION: Effectiveness of the Financing Statement identification Statement	ed above is terminated w	ith respect to the security in	terest(s) of Sec	cured Party authorizing	ng this Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate aff			me of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identication continued for the additional period provided by applicable law	tified above with respect	to the security interest(s) of	Secured Party	authorizing this Con	tinuation Statement is
5. PARTY INFORMATION CHANGE:	and those three he	vaa ta:			
Check <u>one</u> of these two boxes: This Change affects Debtor <u>or</u> Secured Party of record	neck <u>one</u> of these three bo CHANGE name and/or a item 6a or 6b; <u>and</u> item 7		name: Comple r 7b, <u>and</u> item 7	te itemDELETE :	name: Give record name ted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
6a. ORGANIZATION'S NAME					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAI	L(S) SUFFIX
STRICKLAND	THOMA	S			_
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	v Information Change - provide «	nly one name (7a or 7h) (use exact			
	y intormation Change - provide t	m) one name (14 or 15) (400 oxact)	full name; do not or	nit, modify, or abbreviate ar	ny part of the Debtor's name)
7a. ORGANIZATION'S NAME	y intormation Change - provide t	m) one name (re or re) (acc oxact)	full name; do not or	nit, modify, or abbreviate ar	ny part of the Debtor's name)
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7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME	y intorination Change - provide t		full name; do not or	nit, modify, or abbreviate at	
7a. ORGANIZATION'S NAME OR 7b. INDIVIDUAL'S SURNAME	y intormation Change - provide C		full name; do not or	nit, modify, or abbreviate at	suffix
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS	CITY		full name; do not or	POSTAL CODE	SUFFIX
7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
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7a. ORGANIZATION'S NAME 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) 7c. MAILING ADDRESS 2008 HAWTHORNE LN	CITY BIRMIN	GHAM	STATE	POSTAL CODE 35244	SUFFIX
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