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	FINANCING STATEMENT W INSTRUCTIONS					
	AME & PHONE OF CONTACT AT FILER (optional)					
B. E-I	MAIL CONTACT AT FILER (optional)			•		
C. SE	ND ACKNOWLEDGMENT TO: (Name and Address)					
	BLUE WORLD POOLS INC 120 INTERSTATE N PKWY E STE 426 ATLANTA, GA 30339			20200624000258990 1/3 \$68.45 Shelby Cnty Judge of Probate, AL 06/24/2020 12:40:50 PM FILED/CERT		
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			ТН	E ABOVE SPACE IS FOR FILING OFF	ICE USE ONLY	
1. DE	EBTOR'S NAME: Provide only one Debtor name (1a or 1b)	(use exact, full name; do not o	mit, modify, or abbrevi	ate any part of the Debtor's name); if any part of	of the individual Debtor's name	
will no	ot fit in line 1b, leave all of item 1 blank, check here 🗌 and pro	ovide the Individual Debtor infor	mation in item 10 of the	he Financing Statement Addendum (Form UCC1	Ad)	
	1a. ORGANIZATION'S NAME		<u> </u>			
OR	1b. INDIVIDUAL'S SURNAME	EIDCT DEDCONIAL NIABAE		ADDITIONAL MANAGERS (INVESTIGATE)		
	GOWENS	FIRST PERSONAL NAME HERMAN		ADDITIONAL NAME(S)/INITIALS	SUFFIX	
	AILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
	HANNAH DR	VINCENT	AL	35178	USA	
	BTOR'S NAME: Provide only one Debtor name (2a or 2b) at fit in line 2b, leave all of item 2 blank, check here \square and provide item 2 blank, check here \square and provide the second secon					
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0.0	2a. ORGANIZATION'S NAME					
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIALS	SUFFIX	
2c. M	AILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
343	HANNAH DR	VINCENT	AL	35178	USA	
3. SE(CURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNO	OR SECURED PARTY): Provide on	ly <u>one</u> Secured Party n	ame (3a or 3b)		
	3a. ORGANIZATION'S NAME					
OR Blue World Pools, Inc.						
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIALS	SUFFIX	
	AILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY	
	O Double Diamond Pkwy Suite 4925	Reno	NV	89521	USA	
A I M(343 VII AN	PERMANENT LIEN FILED AGAINST A ONTHS. THE POOL IS LOCATED AT: 3 HANNAH DR NCENT, AL 35178 DESCRIBED BELOW: E EXHIBIT "A".		T above ground	d pool) FINANCED FOR A TER	M OF (132)	
TH	IE OWNERS ARE: GOWENS, HERMANIE MAXIMUM PRINCIPAL INDEBTED: ECORDING TAX PURPOSES IS \$18,282.	NESS FOR ALABAM	[A			
	ck <u>only</u> if applicable and check <u>only</u> one box: Collateral is \(\Bar{1} \) he		n being administere	ed by a Decedent's Personal Representative		
6a. Che	eck <u>only</u> if applicable and check <u>only</u> one box			6b. Check only if applicable and check or		
	Public-Finance Transaction	nsaction		☐ Agricultural Lien ☐ Non-UCC ☐ ☐ Seller/Buyer ☐ Ballee/Ballor		
	TIONAL FILER REFERENCE DATA:	- Consignee/ Con		L. Dallee/ Ballor	☐ Licensee/Licensor	

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME GOWENS FIRST PERSONAL NAME HERMAN ADDITIONAL NAME(S)/INITIAL(S) SUFFIX THE ABOVE SPACE IS FOR FILING OFFIC do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) CITY STATE POSTAL CODE 11. □ ADDITIONAL SECURED PARTY'S NAME or □ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME	ate, AL LED/CERT		
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OR 11h INDIVIDUALIC CUIDMANAS			
11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIALS	SUFFIX		
11c. MAILING ADDRESS CITY STATE POSTAL CODE	COLUMN		
JANE FOSTAL CODE	COUNTRY		
13. ☑ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL 14. This FINANCING STATEMENT: ESTATE RECORDS (if applicable)			
Covers timber to be out □ covers as-extracted collateral ⊠ is filed	l as a fixture fling		
15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): 16. Description of real estate:	16. Description of real estate: A PERMANENT LIEN FILED AGAINST A Classic 24: (1) - 24 FT above ground pool FINANCED FOR A TERM OF 132 MONTHS. THE POOL IS LOCATED AT: 343 HANNAH DR VINCENT, AL 35178 AND DESCRIBED BELOW:		
FT above ground pool FINANCED FOR A TERM (MONTHS. THE POOL IS LOCATED AT: 343 HANNAH DR VINCENT, AL 35178			
SEE EXHIBIT "A".			

17. MISCELLANEOUS:

Loan #

: GOWENS

Exhibit A

LEGAL DESCRIPTION

The following described property:

Lot 21, according to the Amended Map of Hanna Farms, as recorded in Map Book 26, Page 129, in the probate office of Shelby County, Alabama.

Assessor's Parcel No:

07-1-01-0-002-021-000

20200624000258990 3/3 \$68.45

Shelby Cnty Judge of Probate, AL 06/24/2020 12:40:50 PM FILED/CERT