20200914000409640 09/14/2020 01:53:18 PM REL 1/1

UCC FINANCING STATEMENT AMENDMEN	JT	REL 1/1				
FOLLOWINSTRUCTIONS	* •					
A. NAME & PHONE OF CONTACT AT FILER (optional)						
Anna Margaret Tidwell (256) 280-9198						
B. E-MAIL CONTACT AT FILER (optional)						
amtidwell@myprogressbank.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address)						
Progress Bank and Trust	•					
PO Box 1905						
Decatur, AL 35602	,					
<u></u>		THE ABOVE SBA	CE IB EC	NO GUINO OFFICE I	ICT O	
1a, INITIAL FINANCING STATEMENT FILE NUMBER	1b			R FILING OFFICE I		
Shelby County UCC #20191213000461540 Pg		or recorded) in the REAL. (or recorded)	ESTATE	RECORDS	·	-
2. TERMINATION: Effectiveness of the Financing Statement identified about the Statement	· · · · · · · · · · · · · · · · · · ·	Filer: <u>attach</u> Amendment Add respect to the security interes				
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or For partial assignment, complete items 7 and 9 and also indicate affected	7b, <u>and</u> address of A collateral in item 8	ssignee in item 7c <u>and</u> name o	f Assigno	r in item 9		
4. CONTINUATION: Effectiveness of the Financing Statement identified a continued for the additional period provided by applicable law	above with respect to	the security interest(s) of Sec	ured Party	authorizing this Conti	nuation	Statement is
5. PARTY INFORMATION CHANGE:				·		
	<u>ne</u> of these three boxe	es to:				
	<del></del>	iress: CompleteADD nam or 7b and item 7c7a or 7b,	ne: Comple	ete itemDELETE n		ive record name
6. CURRENT RECORD INFORMATION: Complete for Party Information Cha			GIIG HOIH I	cto be delet	eu III kei	ii da ui db
6a. ORGANIZATION'S NAME						
Eddleman Residential, LLC						
6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL	NAME	ADDITIO	NAL NAME(S)/INITIAL	(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Complete for Complete for Assignment or Party Information Complete for Co	ation Change - provide only	/ <u>one</u> name (7a or 7b) (use exact, full na	me; do not o	mit, modify, or abbreviate any	part of th	e Debtor's name)
7a. ORGANIZATION'S NAME						
OR 7b. INDIVIDUAL'S SURNAME					·	
INDIVIDUAL'S FIRST PERSONAL NAME		***************************************				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			···			er reciv
						SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE		COUNTRY
2700 Highway 280 East	Birmingh	am	AL	35223		USA
		1				· · · · · · · · · · · · · · · · · · ·
Indicate collateral:	ob collateral	DELETE collateral R	ESTATE	overed collateral	L_J AS:	SIGN collateral
		113		l Recorded Public Records		
			Clerk	Probate, Shelby County Alabama	, County	
			•	ounty, AL :0 01:53:18 PM ERRY		
		LAHAM		000409640	au	- S. Buyl
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	MENDMENT: Prov	/ide only <u>one</u> name (9a or 9b) (n	ame of As	signor, if this is an Assi	grment	
If this is an Amendment authorized by a DEBTOR, check here and provide	name of authorizing	Debtor			<b>.</b>	
9a. ORGANIZATION'S NAME  Procesors Pords ond Transf						
Progress Bank and Trust  9b. INDIVIDUAL'S SURNAME			1			<b></b>
PP. HADIAIDOVE O POKNAMIZ	FIRST PERSONAL	. NAME	ADDITIO	NAL NAME(S)/INITIAL(	(S)	SUFFIX
40 OPTIONAL ER ED BEGERENOE DATA:						
10. OPTIONAL FILER REFERENCE DATA: 9001329900						