UCC FINANCING STATEMENT AMENDME FOLLOWINSTRUCTIONS	:NI				
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)					
		2020091	40004	109670	
Progress Bank and Trust PO Box 1905		09/14/20	20 01	:57:33 PM	
Decatur, AL 35602		REL 1/1	1		
		THE ABOVE SPA	CE IS FO	OR FILING OFFICE US	SE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER Shelby County UCC #20191230000481560 Pgs 1-2		1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer. attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13			
2. TERMINATION: Effectiveness of the Financing Statement identified a Statement	above is terminated w	ith respect to the security intere	est(s) of Se	cured Party authorizing	this Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a For partial assignment, complete Items 7 and 9 <u>and</u> also indicate affect	or 7b, <u>and</u> address of ted collateral in item 8	Assignee in item 7c and name	of Assigno	r in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement Identified continued for the additional period provided by applicable law	ed above with respect	to the security interest(s) of Se	cured Party	authorizing this Continu	ation Statement is
5. PARTY INFORMATION CHANGE:					
The state of the part of	k <u>one</u> of these three bo				
	HANGE name and/or a em 6a or 6b; <u>and</u> item 7		me: Compl , <u>and</u> item 7	c DELETE nan	ne: Give record name in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information C	Change - provide only g	ne name (6a or 6b)			
Scotch Homes & Land Development Gro	um. Inc.				
6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX				
7. CHANGED OR ADDED INFORMATION: Complete for Accionment or Portulate	Appelles Change and de-	-1			
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Info	omiation Change - provide o	ay <u>one</u> name (7a or 7b) (use exact, with	ame; do not o	mit, modity, or abbreviate any p	art of the Debtor's name)
OR					
7b. INDIVIDUAL'S SURNAME			-		<u>-</u>
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS 907 Willow Branch Trail	CITY		STATE	POSTAL CODE	COUNTRY
	Chelsea		AL	35043	USA
	ADD collateral	DELETE collateral I	RESTATE	covered collateral	ASSIGN collateral
Indicate collateral;		Fil	ed and Reco	rded	
		OI	ficial Public		County
		Cl	erk elby County.		, •
		\ <u>\</u> \	/14/2020 01:5 00 CHERRY		^
		20	20091400040	09670	alli 5. Buy
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9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS If this is an Amendment authorized by a DEBTOR, check here and provi	S AMENDMENT: Pr	ovide only <u>one</u> name (9a or 9b) (name of As	signor, if this is an Assign	ment)
9a, ORGANIZATION'S NAME	ide name of authorizing	h nantol.		·····	· · · · · · · · · · · · · · · · · · ·
Progress Bank and Trust					
9b. INDIVIDUAL'S SURNAME	FIRST PERSONA	LNAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: 9001334300			-		
/VV&JJVU					