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The way all on the second seco	•				
UCC FINANCING STATEMENT AMENDE FOLLOW INSTRUCTIONS	OMENT				
A. NAME & PHONE OF CONTACT AT FILER (optional)					
Connie Sorenson (801) 747-7713	1020475				
B. EMAIL CONTACT AT FILER (optional) csorenson@medallion.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
MEDALLION BANK					
1100 EAST 6600 SOUTH, SUITE 510		20210	11100001673	0 1/2 \$.00	
SALT LAKE CITY, UT 84121	•	Shelb	y Cnty Judg	e of Probat	
FILED IN: SHELBY,	AL	01/11	/2021 01:53	:38 PM FILE	DICERI
1a. INITIAL FINANCING STATEMENT FILE NUMBER	lib.	THE ABOVE SPA			a a
20191119000430000		(or recorded) in the REAL ESTA Filer: <u>attach</u> Amendment Addendum (ATE RECORDS Form UCC3Ad) <u>and</u> pr	rovide Debtor's name	in item 13
2. TERMINATION: Effectiveness of the Financing Statement ident Statement	tified above is terminated wi	th respect to the security interest(s)	of Secured Party a	authorizing this Ter	mination -
3. ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate a	m 7a or 7b, <u>and</u> address of A affected collateral in item 8	Assignee in item 7c <u>and</u> name of As	ssignor in item 9	_	
4. CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law	ntified above with respect to	the security interest(s) of Secured	Party authorizing ti	his Continuation S	tatement is
5. PARTY INFORMATION CHANGE:				· <u> </u>	
Check <u>one</u> of these two boxes:	heck <u>one</u> of thse three boxe	es to:			
This Change affects Debtor or Decured Party of record	CHANGE name and/or addr tem 6a or 6b; <u>and</u> item 7a o	ess: Complete	Complete item		ne: Give record name in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information			id item 70	to be deleted	III ILEIII OA OI OD
6a, ORGANIZATION'S NAME			-		
OR 66. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAM	ME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION:Complete for Assignment or Party Information Complete for Assignment On Complete for Complete for Assignment On Complete for Co	ation Change - provide only <u>one</u> r	name(7a or 7b) (use exact, full name; do no	ot omit, modify, or abbr	eviate any part of the	Debtor's name)
7a. ORGANIZATION'S NAME					
OR 75.INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
	_ 		<u></u>		
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE covere	ed collateral	ASSIGN collateral
Indicate collateral:	ASB Collatoral		NEOTATE COVER	d Collateral LL	AGGIGIT COllateral
Inground Swimming Pool - Fixture Filing THE FOLLOWING PROPERTY IS SITUATED IN B	ESSEMER. COUNT	Y OF SHELBY, STATE OF	ALABAMA TO	O WIT: COM I	VE COR SE1/4
SW1/4 N578.78 SW924385 TO POB CONT SW196	5.64 SE708.24 TO RI	D NE123.2 NW709.73 TO	POB SEC 28 T		
ADDRESS: 5246 S SHADES CREST RD, BESSEN	HER, AL 35022 PARC	JEL 1D#:12-8-28-0-000-01	7-001		
Owners: Craig Collum 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING	IG THIS AMENIDMENT	Provide only one name (0 0-)	(nama of Accions	if this is so A = -1	mant\
If this is an Amendment authorized by a DEBTOR, check here			(Hairie Of Assignor,	า แมราร an Assigr	unent)
9a. ORGANIZATION'S NAME	•	-			
OR MEDALLION BANK 9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAM	ME(SVINITIA) (SV	SLIFFIX
			I. PERCIONAL MAN	(U)	JUI 1 1/1
10 OPTIONAL FILER REFERENCE DATA:					

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS			
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on A	Amendment form		
20191119000430000			
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9	on Amendment form		
12a. ORGANIZATION'S NAME			
MEDALLION BANK			
OR			
12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
		20210111000016730 2/2 \$.00 Shelby Cnty Judge of Probate	~ OI
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	01/11/2021 01:53:38 PM FILE	•
13. Name of DERTOR on related financing statement (Name of a current Debter of rec		THE ABOVE SPACE IS FOR FILING OFFICE	إحسانات المسال المسال
13. Name of DEBTOR on related financing statement (Name of a current Debtor of reconnected Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreveness.	ord required for indexing puposes only viate any part of the Debtor's name); s	ly in some filing offices - see instructions item 13): Provide see Instructions if name does not fit	only
13a. ORGANIZATION'S NAME			
OR 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Collum	Craig		
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):			
Inground Swimming Pool - Fixture Filing			
inground ownning roof - rixture rining			
POB SEC 28 T20 R4W PROPERTY ADDRESS: 52-8-28-0-000-017-001 Record Owner: Craig Collum,	46 S SHADES CREST	RD, BESSEMER, AL 35022 PARC	EL ID#:12
Debtors: Craig Collum,			
Secured Party - Medallion Bank	· · · · · · · · · · · · · · · · · · ·		
15. This FINANCING STATEMENT AMENDMENT:	17. Description of	of real estate:	
covers timber to be cut covers as-extracted collateral is filed a	s a fixutre filing		
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):			
	BESSEME ALABAMA N578.78 S SE708.24 T20 R4W	LOWING PROPERTY IS SITUATED ER, COUNTY OF SHELBY, STATE A TO WIT: COM NE COR SE1/4 SW SW924385 TO POB CONT SW196.0 TO RD NE123.2 NW709.73 TO PO PROPERTY ADDRESS: 5246 S SH D, BESSEMER, AL 35022 PARCEL 017-001	OF V1/4 64 OB SEC 28 HADES
18. MISCELLANEOUS:			