

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

20210120000031260 1/3 \$.00
Shelby Cnty Judge of Probate, AL
01/20/2021 12:52:25 PM FILED/CERT

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141	
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 30691 - REDBRICK	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	78581330 ALAL FIXTURE
File with: Shelby, AL	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 20160614000205720 6/14/2016 CC AL Shelby		1b. <input checked="" type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13	
2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement			
3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, <u>and</u> address of Assignee in item 7c <u>and</u> name of Assignor in item 9 For partial assignment, complete items 7 and 9 <u>and</u> also indicate affected collateral in item 8			
4. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law			
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record <u>AND</u> Check <u>one</u> of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; <u>and</u> item 7a or 7b <u>and</u> item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, <u>and</u> item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b			
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)			
6a. ORGANIZATION'S NAME			
OR			
6b. INDIVIDUAL'S SURNAME BERTSCHINGER		FIRST PERSONAL NAME JOSEPH	ADDITIONAL NAME(S)/INITIAL(S) COLLIN
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only <u>one</u> name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)			
7a. ORGANIZATION'S NAME			
OR			
7b. INDIVIDUAL'S SURNAME			
INDIVIDUAL'S FIRST PERSONAL NAME			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			
SUFFIX			
7c. MAILING ADDRESS		CITY	STATE
		POSTAL CODE	COUNTRY
8. <input type="checkbox"/> COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:			

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor			
9a. ORGANIZATION'S NAME WF HIL 2020-2 Grantor Trust c/o Wilmington Savings Fund Society, FSB, as Owner Trustee			
OR			
9b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)
		SUFFIX	
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: BERTSCHINGER, JOSEPH COLLIN 78581330 REDBRICK 20161559179			

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

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11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

20160614000205720 6/14/2016 CC AL Shelby

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a. ORGANIZATION'S NAME

WF HIL 2020-2 Grantor Trust c/o Wilmington Savings Fund Society, FSB,

as Owner Trustee

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

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13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

13a. ORGANIZATION'S NAME

OR

13b. INDIVIDUAL'S SURNAME

BERTSCHINGER

FIRST PERSONAL NAME

JOSEPH

ADDITIONAL NAME(S)/INITIAL(S)

COLLIN

SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

Debtor Name and Address:

BERTSCHINGER, JOSEPH COLLIN - 645 MERIWEATHER DR , CALERA, AL 35040

BERTSCHINGER, FANNETRA - 645 MERIWEATHER DR , CALERA, AL 35040

Secured Party Name and Address:

WF HIL 2020-2 Grantor Trust c/o Wilmington Savings Fund Society, FSB, as Owner Trustee - 500 Delaware Avenue 11th Floor, Wilmington, DE 19801

15. This FINANCING STATEMENT AMENDMENT:

☐ covers timber to be cut ☐ covers as-extracted collateral ☒ is filed as a fixture filing

16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):

17. Description of real estate:

Legal Description:

County: SHELBY, AL APN:

28-4-20-1-001-016-073

Census Tract / Block: 305.01 / 3 Alternate

APN:

Township-Range-Sect: 22-2W-20 Subdivision:

MERIWEATHER SECTOR 4

Legal Book/Page: 29-93 Map Reference: /

Legal Lot: 103 Tract #:

[See Exhibit for Real Estate]

18. MISCELLANEOUS: 78581330-AL-117 30691 - REDBRICK FINANCIAL G WF HIL 2020-2 Grantor Trust c/o File with: Shelby, AL REDBRICK 20161559179



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Debtor: BERTSCHINGER, JOSEPH, COLLIN

Exhibit for Real Estate

17. Description of real estate: Continued

Legal Block: School District: 2
Market Area: School District Name: SHELBY COUNTY
SCHOOL
DISTRICT
Neighbor Code: CV9 Munic/Township: CALERA

SHELBY, AL