UCC FINANCING STATEMENT AMENDMENT

| FOLLOW INSTRUCTIONS | MENT | | | |
|---|---|--|---|---------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3 | 1 | | | |
| B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com | | | | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) 202 | | | | |
| Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071 C. Send Address) 20279 - BBVA USA 78995367 ALAL | | | | |
| | | 20210215000076590 1/2 \$.00 | | |
| | | Shell | by Cnty Judge of Probate 5/2021 12:18:16 PM FILED | |
| | FIXTURE | | | |
| File with: Shelby, AL | | | ACE IS FOR FILING OFFICE L | |
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER 20040517000260920 5/17/2004 CC AL Shelby | | (or recorded) in the REA | EMENT AMENDMENT is to be filed L ESTATE RECORDS dendum (Form UCC3Ad) <u>and</u> provide Del | |
| 2. X TERMINATION: Effectiveness of the Financing Statement iden Statement | tified above is terminated wi | | <u>-</u> | |
| 3. ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicates | n 7a or 7b, <u>and</u> address of <i>i</i> ite affected collateral in item | Assignee in item 7c <u>and</u> name of A | Assignor 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 Secure | d Party authorizing this Continuation | Statement is |
| 5. PARTY INFORMATION CHANGE: | | | | |
| Check one of these two boxes: | <u>D</u> Check <u>one</u> of these three be CHANGE name and/or | | ne: Complete item DELETE nam | e: Give record name |
| This Change affects Debtor or Secured Party of record | CHANGE name and/or item 6a or 6b; <u>and</u> item | | and item 7c to be deleted | in item 6a or 6b |
| 6. CURRENT RECORD INFORMATION: Complete for Party Information. 6a. ORGANIZATION'S NAME | on Change - provide only <u>or</u> | ne name (6a or 6b) | | |
| COBBLESTONE COVE LTD AN ALABAMA L | IMITED PARTNERS | SHIP | | |
| OR 6b. INDIVIDUAL'S SURNAME | | NAL NAME | ADDITIONAL NAME(S)/INITIAL(S) SUFFIX | |
| | 13/15/ 13/15/ | | ADDITIONAL NAME(S)/INTTAL(S) | SUFFIX |
| 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party | / Information Change - provide only | one name (7a or 7h) (use exact full name | do not omit, modify, or abbreviate any part of | the Debter's name) |
| 7a. ORGANIZATION'S NAME | , | | | the Debtor 3 hame) |
| | | | | |
| 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 |
| | | | <u> </u> | <u> </u> |
| 8. COLLATERAL CHANGE: Also check one of these four box | es: ADD collateral | ☐ DELETE collateral | RESTATE covered collateral | ASSIGN collateral |
| Indicate collateral: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 9. NAME of SECURED PARTY of RECORD AUTHORIZING | THIS AMENIDMENT. D | Provide only one name (Oc. or Oh) (r | ome of Acolonou if this is an Acolona | |
| | and provide name of authoriz | | iathe of Assignor, it this is all Assigni | nent) |
| 9a. ORGANIZATION'S NAME | | | | |
| Compass Bank | | | | |
| 9b. INDIVIDUAL'S SURNAME | FIRST PERSON | NAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
| | | <u>. </u> | | |
| | BLESTONE COVE LT | D AN ALABAMA LIMITED P | | |
| 78995367 33221 | | | 77-4192 (AFS) | |

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 20040517000260920 5/17/2004 CC AL Shelby 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a. ORGANIZATION'S NAME Compass Bank 12b. INDIVIDUAL'S SURNAME 20210215000076590 2/2 \$.00 FIRST PERSONAL NAME Shelby Cnty Judge of Probate, AL 02/15/2021 12:18:16 PM FILED/CERT ADDITIONAL NAME(S)/INITIAL(S) **SUFFIX** THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 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 COBBLESTONE COVE LTD AN ALABAMA LIMITED PARTNERSHIP OR 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): Debtor Name and Address: COBBLESTONE COVE LTD AN ALABAMA LIMITED PARTNERSHIP - 496 HIGHWAY 67 SOUTH, DECATUR, AL 35603 Secured Party Name and Address: Compass Bank - 701 32nd St South, Birmingham, AL 35233 15. This FINANCING STATEMENT AMENDMENT: 17. Description of real estate: is filed as a fixture filing 496 HWY 67 SOUTH covers as-extracted collateral covers timber to be cut 16. Name and address of a RECORD OWNER of real estate described in item 17 DECATUR AL 35603 (if Debtor does not have a record interest):

33221 77-4192 (AFS)

Compass Bank

File with: Shelby, AL

18. MISCELLANEOUS: 78995367-AL-117 20279 - BBVA USA (Collateral