## UCC FINANCING STATEMENT AMENDMENT

EOLLOWINGTELLOTIONS

Philadelphia, PA 19103

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. E-MAIL CONTACT AT FILER (optional)

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

Jennifer L. Shectman

Land Services USA, Inc.

1835 Market Street, Suite 420

20210319000138810 03/19/2021 11:27:18 AM UCC6 1/1



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
03/19/2021 11:27:18 AM
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		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY			
1a. INITIAL FINANCING STATEMENT FILE NUMBER  Doc. No. 20190114000013290; File da	te: 1/14/2019		G STATEMENT AMEN the REAL ESTATE RE ndment Addendum (Form		
2. TERMINATION: Effectiveness of the Financing Statement	t identified above is terminated	I with respect to the secu	rity interest(s) of Secu	red Party authorizing	this Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee For partial assignment, complete items 7 and 9 and also incomplete.			<u>nd</u> name of Assignor in	item 9	
4. CONTINUATION: Effectiveness of the Financing Statem continued for the additional period provided by applicable la		ct to the security interest	(s) of Secured Party a	uthorizing this Contir	nuation Statement is
Debtor or Secured Party of record  5. PARTY INFORMATION CHANGE:  Check one of these two boxes:  This Change affects Debtor or Secured Party of record	AND Check <u>one</u> of these three  CHANGE name and/o item 6a or 6b; <u>and</u> iter	boxes to: or address: Complete on 7a or 7b <u>and</u> item 7c	ADD name: Complete 7a or 7b, <u>and</u> item 7c		ame: Give record name ed in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party In	nformation Change - provide on	y <u>one</u> name (6a or 6b)			
6a. ORGANIZATION'S NAME  OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSO	TNIAL NIAME	LADDITIONA	AL NAME(S)/INITIAL(S	S) SUFFIX
OD. IIVDIVIDOAL O OOKIVAIVIL		JINAL INAIVIL	ADDITIONA	(C NAME(O)/IIVITIAE(	
7. CHANGED OR ADDED INFORMATION: Complete for Assignmental Complete fo	ent or Party Information Change - provid	de 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. COLLATERAL CHANGE: Also check one of these four bound indicate collateral:	oxes: ADD collateral	DELETE collateral	RESTATE COV	ered collateral	ASSIGN collateral

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)									
	If this is an Amendment authorized by a DEBTOR, check here 🔲 and provide name of authorizing Debtor								
	9a. ORGANIZATION'S NAME								
OR	ACAM 2019-FL1, LTD.								
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX					

10. OPTIONAL FILER REFERENCE DATA:

To be filed with Shelby County, Alabama (c/m 069550 - 00019) (Fixture Filing)