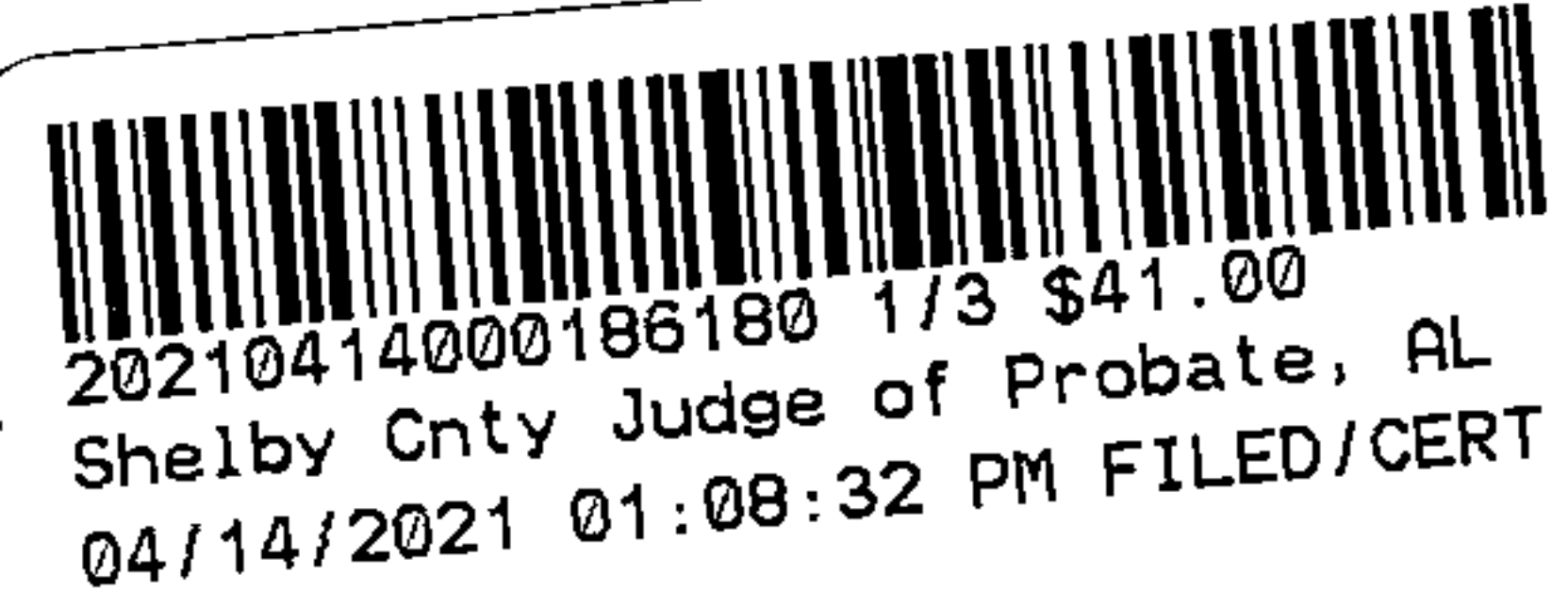


# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

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)	26405 - RENASANT
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	79337742 ALAL FIXTURE
File with: Shelby, AL	



THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER * 20160414000122460 BK 2016040424 PG 1 4/14/2016 CC AL	1b. <input checked="" type="checkbox"/> 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. <input 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, and address of Assignee in item 7c and name of Assignor in item 9 For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8	
4. <input checked="" 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 one of these two boxes: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check one of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, and 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 one name (6a or 6b)	
6a. ORGANIZATION'S NAME	
OR	6b. INDIVIDUAL'S SURNAME DOBBS
	FIRST PERSONAL NAME SHANNON
	ADDITIONAL NAME(S)/INITIAL(S)
	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one 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: Also check one 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:	

The complete information for 1a. INITIAL FINANCING STATEMENT FILE NUMBER

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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 <input type="checkbox"/> and provide name of authorizing Debtor			
9a. ORGANIZATION'S NAME Renasant Bank			
OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)
			SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: DOBBS, SHANNON 79337742 0009 9100306-1			

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form  
20160414000122460 BK 2016040424 PG 1 4/14/2016 CC AL Shelby

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

12a. ORGANIZATION'S NAME  
Renasant Bank

OR

12b. INDIVIDUAL'S SURNAME  
  
FIRST PERSONAL NAME  
  
ADDITIONAL NAME(S)/INITIAL(S)  
  
SUFFIX



20210414000186180 2/3 \$41.00  
Shelby Cnty Judge of Probate, AL  
04/14/2021 01:08:32 PM FILED/CERT

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

OR

13b. INDIVIDUAL'S SURNAME  
DOBBS

FIRST PERSONAL NAME  
SHANNON

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):  
Debtor Name and Address:  
DOBBS, SHANNON - 125 CAMPGROUND RD , TUPELO, MS 38804  
  
Secured Party Name and Address:  
Renasant Bank - P O Box 709 , Tupelo, MS 38802

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:  
  
Page No:  
1  
Book No:  
2016040424

## WAIVER OF SURVEY

Property Address:

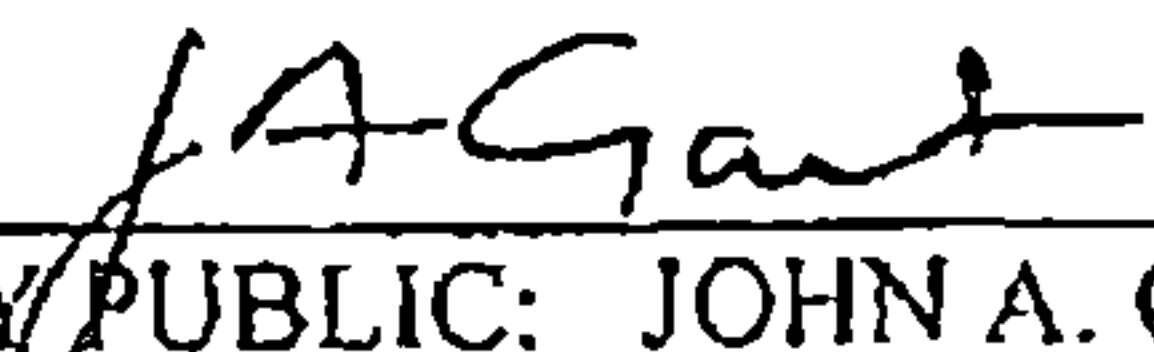
364 Goodwin Cir.  
Vincent, AL 35178

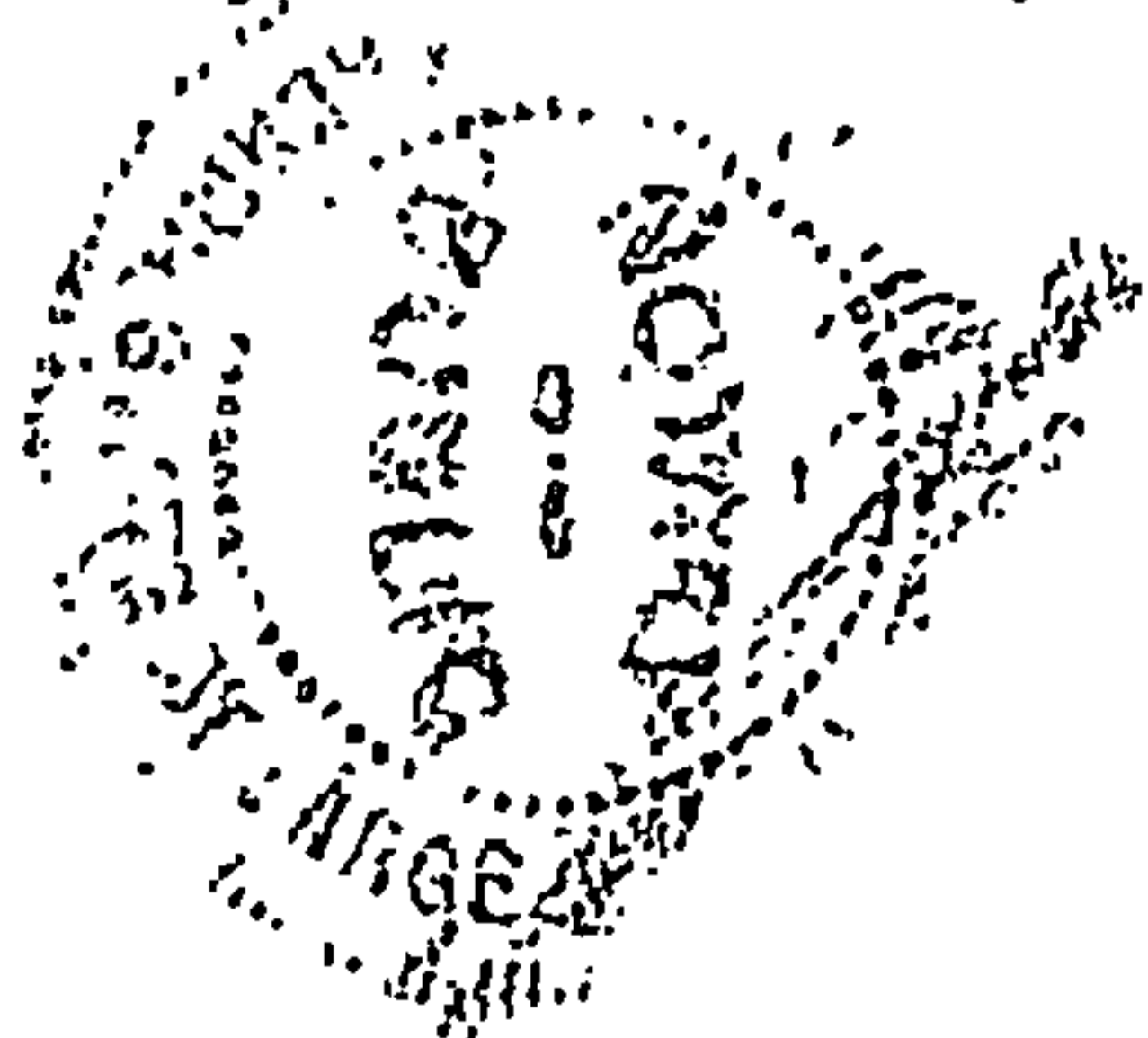
We have been advised that we have the right to have a survey prepared by the certified civil engineer of our choice. After this disclosure, we elect not to have a survey made. In the event that a problem or problems are later discovered which could or would have been revealed by a survey had one been made, we agree to hold Law Office of John A. Gant, P.C., as closing agent Stewart Title Guaranty Company, as title insurer Renasant Bank as Lender, harmless as to any and all liability, claims, damages or other matters arising out of or relating to said discoveries. None of the above parties have provided us with any specific information regarding the amount of acreage being conveyed, nor have they represented to us any information concerning the property boundaries or any easements on the subject property.


  
SHANNON DOBBS

  
JOSHUA PARKER

Sworn and subscribed before me this 22<sup>nd</sup> day of March, 2016.

  
NOTARY PUBLIC: JOHN A. GANT  
My Commission Expires: 10/3/2017



  
20210414000186180 3/3 \$41.00  
Shelby Cnty Judge of Probate, AL  
04/14/2021 01:08:32 PM FILED/CERT