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UCC FINANCING STATEMENT AMENDMENT UCC6 1/3 FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) Virginia S. Boliek (205) 533-3557 B. E-MAIL CONTACT AT FILER (optional) virginia.boliek@gmail.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) Virginia S. Boliek Law Office of Virginia Boliek, LLC 1301 Panorama Dr Birmingham, AL 35216 THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] 1a. INITIAL FINANCING STATEMENT FILE NUMBER (or recorded) in the REAL ESTATE RECORDS 20140902000273740 Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13 2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement 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 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 PARTY INFORMATION CHANGE: AND Check one of these three boxes to: Check one of these two boxes: DELETE name: Give record name ADD name: Complete item CHANGE name and/or address: Complete This Change affects Debtor <u>or</u> Secured Party of record item 6a or 6b; and item 7a or 7b and item 7c 7a or 7b, <u>and</u> item 7c 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 6b. INDIVIDUAL'S SURNAME SUFFIX FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) 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 7b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX POSTAL CODE 7c. MAILING ADDRESS COUNTRY CITY STATE COLLATERAL CHANGE: Also check one of these four boxes: DELETE collateral RESTATE covered collateral ADD collateral ASSIGN collateral Indicate 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 Progress Bank and Trust successor to First Partners Bank 9b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME

10. OPTIONAL FILER REFERENCE DATA:

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|          | IITIAL FINANCING STATEMENT FILE NUMBER: Same $140902000273740$  | e as item 1a on Amendment fo  | rm                 |                    |                               |              |
|----------|---|-------------------------------|--------------------|--------------------|-------------------------------|--------------|
| . N      | AME OF PARTY AUTHORIZING THIS AMENDMENT: 9  | Same as item 9 on Amendmer    | nt form            |                    |                               |              |
| - 1      | Progress Bank and Trust successon   | r to First Partne             | rs Bank            |                    |                               |              |
|          |   |                               |                    |                    |                               |              |
|          | 2b. INDIVIDUAL'S SURNAME  |                               |                    |                    |                               |              |
|          | FIRST PERSONAL NAME   |                               |                    |                    |                               |              |
| ŀ        | ADDITIONAL NAME(S)/INITIAL(S)   |                               | SUFFIX             |                    |                               |              |
|          | lame of DERTOR on related financing statement (Name   | of a current Debter of record | required for index |                    | SPACE IS FOR FILING OFFICE U  |              |
|          | lame of DEBTOR on related financing statement (Name<br>one Debtor name (13a or 13b) (use exact, full name; do not omit, |                               |                    |                    |                               | 13): Provide |
| - 1      | 3a. ORGANIZATION'S NAME  CALVINE SOUTH, LLC   |                               |                    |                    |                               |              |
| ╌┝       | 13b. INDIVIDUAL'S SURNAME   | FIRST PER                     | SONAL NAME         |                    | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX       |
|          |   |                               |                    |                    |                               |              |
|          |   |                               |                    |                    |                               |              |
|          |   |                               |                    |                    |                               |              |
|          |   |                               |                    |                    |                               |              |
|          |   |                               |                    |                    |                               |              |
|          |   |                               |                    |                    |                               |              |
| . Ti     | nis FINANCING STATEMENT AMENDMENT:  |                               | 17. Descripti      | on of real estate: |                               |              |
|          | covers timber to be cut covers as-extracted collateral  |                               |                    | on of real estate: |                               |              |
| <br>. N. | _   |                               |                    |                    |                               |              |
| N.       | covers timber to be cut covers as-extracted collateral  |                               |                    |                    |                               |              |
| <br>. N  | covers timber to be cut covers as-extracted collateral  |                               |                    |                    |                               |              |
| <br>. N  | covers timber to be cut covers as-extracted collateral  |                               |                    |                    |                               |              |
| <br>. N  | covers timber to be cut covers as-extracted collateral  |                               |                    |                    |                               |              |

18. MISCELLANEOUS:

## **EXHIBIT** A

## LEGAL DESCRIPTION

Unit 36, 38, and 40, in Two-Eighty Village, a Condominium, as established by that certain Declaration of Condominium, which is recorded in Instrument No. 20070131000045880, in the Probate Office of Shelby County, Alabama, and any amendments thereto, to which Declaration of Condominium, a plan, is attached as Exhibit "C" thereto, and as recorded in the Record Plat of Two-Eighty Village, a Condominium, in Map Book 38, Page 36, and any future amendments thereto, and to which said Declaration of Condominium the By-Laws of Two-Eighty Village Association, Inc., are attached as Exhibit "B" thereto, together with an undivided interest in the Common Elements assigned to said Unit, by said Declaration of Condominium set out in Exhibit "D".



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
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Question 5. Best