UCC FINANCING STATEMENT AMENDMENT

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FOLLOW INSTRUCTIONS			UCC6 1/1	-
A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294				
B. E-MAIL CONTACT AT FILER (optional)		-		
SPRFiling@cscglobal.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		2021051300023870		labama, County
2111 08421		Shelby Cnty Judg		
CSC 801 Adlai Stevenson Drive		05/13/2021 03:37	:57 PM FILED/CERT	alli 5. B
Springfield II 62703	Filed In: Alabama			
	(Shelby)			
		THE ABOVE SPA	CE IS FOR FILING OFFIC	E USE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20180712000248150 07/12/2018		1b. This FINANCING STATES (or recorded) in the REAL	MENT AMENDMENT is to be ESTATE RECORDS	filed [for record]
2. TERMINATION: Effectiveness of the Financing Statement identification Statement	ed above is terminated w	with respect to the security interes	dendum (Form UCC3Ad) <u>and pro</u> st(s) of Secured Party author	vide Debtor's name in item 13 izing this Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 and also indicate aff	7a or 7b, <u>and</u> address of	Assignee in item 7c and name of	of Assignor in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identication continued for the additional period provided by applicable law			ured Party authorizing this C	ontinuation Statement is
5. PARTY INFORMATION CHANGE:				
Check one of these two boxes:	neck <u>one</u> of these three bo			
This Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; and item 7	ddress: Complete ADD nan a or 7b <u>and</u> item 7c 7a or 7b,	ne: Complete item DELET and item 7c to be de	E name: Give record name eleted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information	on Change - provide only o			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INIT	AL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party 7a. ORGANIZATION'S NAME	Information Change - provide o	nly <u>one</u> name (7a or 7b) (use exact, full na	me; do not omit, modify, or abbreviate	any part of the Debtor's name)
7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS	CITY	<u> </u>	STATE POSTAL CODE	COUNTRY
				COONTR
8. COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral:	ADD collateral	DELETE collateral R	ESTATE covered collateral	ASSIGN collateral
•			•	
				•
O NAME OF SECURED DARTY OF DECORD ATTRICONOMY				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING TI	HIS AMENDMENT: Pr	ovide only <u>one</u> name (9a or 9b) (n n Debtor	ame of Assignor, if this is an A	ssignment)
9a. ORGANIZATION'S NAME Forethought Life Insurance	Company			<u> </u>
9b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIONAL NAME(S)/INITI	AL(S) SUFFIX
10 ODTIONAL FUED DEFENDANCE DATE OF SECTION AND SECTIO				
10. OPTIONAL FILER REFERENCE DATA:030298958/tc Deb	tor:REX Reside	ntial Property Owner	A, LLC	2111 08421