UCC FINANCING STATEMENT AMEN	DMENT					
FOLLOWINSTRUCTIONS						
A. NAME & PHONE OF CONTACT AT FILER (optional) LATOYA FREEMAN						
B. E-MAIL CONTACT AT FILER (optional)				Filed and Recorded		
LOANS@SPIREENERGY.COM C. SEND ACKNOWLEDGMENT TO: (Name and Address)				Official Public Reco Judge of Probate, Sh	ords ielby County Alaban	na, County
SPIRE ALABAMA INC				Clerk Shelby County, AL		
20 20TH STREET SOUTH				06/04/2021 09:56:38 \$.00 JOANN	AM	
BIRMINGHAM, AL 35233		MAHAN		20210604000274120		alei 5. Beyl
		THE ABOVE SPA	ACE IS FO	R FILING OFFICE USE	E ONLY	
1a. INITIAL FINANCING STATEMENT FILE NUMBER	1	1b. This FINANCING STATE (or recorded) in the REA	MENT AME	NDMENT is to be filed [fe		
20180917000332910 2		Filer: <u>attach</u> Amendment Ad	ddendum (For	m UCC3Ad) <u>and</u> provide Del	btor's name in item 13	
2. TERMINATION: Effectiveness of the Financing Statement id Statement	ientified above is terminated w	nth respect to the security intere	est(s) of Sec	cured Party authorizing th	iis rermination	
3. ASSIGNMENT (full or partial): Provide name of Assignee in For partial assignment, complete items 7 and 9 and also indicated			of Assignor	in item 9		
4. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law	identified above with respect	to the security interest(s) of Se	cured Party	authorizing this Continua	ation Statement is	
5. PARTY INFORMATION CHANGE:						
Check one of these two boxes:	<u>ID</u> Check <u>one</u> of these three bo —— CHANGE name and/or a		me: Comple	ete item DELETE name c to be deleted i	e: Give record name	
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information	CHANGE name and/or and/or and/or and item 6a or 6b; <u>and</u> item 7 rmation Change - provide only o		o, <u>and</u> item 7	cto be deleted i	n item 6a or 6b	
6a. ORGANIZATION'S NAME	.					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON.	ALNAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
THARPE	DIRK					
7. CHANGED OR ADDED INFORMATION: Complete for Assignment of Tal. ORGANIZATION'S NAME	or Party Information Change - provide o	only <u>one</u> name (7a or 7b) (use exact, full r	name; do not or	nit, modify, or abbreviate any par	t of the Debtor's name)	
OR 7b. INDIVIDUAL'S SURNAME						
7 D. INDIVIDUAL S SURINAIVIE						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						
7- MAULING ADDDECC	LOUTS/		LOTATE	TROCTAL CODE	COLINITEN	
7c. MAILING ADDRESS 260 OAK FOREST TRL	PELHA	M	STATE	35124	COUNTRY	
8. COLLATERAL CHANGE: Also check one of these four boxe	s: ADD collateral	DELETE collateral	RESTATE o		ASSIGN collateral	
Indicate collateral:						
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here			(name of As	signor, if this is an Assignn	ment)	
9a. ORGANIZATION'S NAME	•					
SPIRE ALABAMA INC 9b. INDIVIDUAL'S SURNAME	FIRST PERSON.	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
10. OPTIONAL FILER REFERENCE DATA:						