



Shelby Cnty Judge of Probate, AL 07/02/2021 10:57:46 AM FILED/CERT

OCC LIMANCING STATEMENT WINELADIM	_1 %				
FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional)					
Teresa Layton 678-821-1564					
B. E-MAIL CONTACT AT FILER (optional)					
tlayton@americancommercebank.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
American Commerce Bank NA					
400 US HWY 27 Bypass					
Bremen Ga 30110				•	
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		THE ABOVE S	SPACE IS FO	R FILING OFFICE	USE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER	}	b. This FINANCING STA			
20160824000305230		(or recorded) in the R	EAL ESTATE	RECORDS	le Debtor's name in item 13
2. TERMINATION: Effectiveness of the Financing Statement identified	shove is terminated v	والرجيد والمستحدث الأثاث	حذب سيدوند		
Statement	above is terrimizated t	nut respect to the security in	ieresi(s) or sec	cured Party authoriza	ng this Termmation
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a	or 7h, and address of	Assignee in item 7c and not	me of Assignar	in item 0	
For partial assignment, complete items 7 and 9 <u>and</u> also indicate affect	ted collateral in item 8	, .55,9,155 iii (telli 76 <u>airu</u>)lal	ue ei Vasiâiioi	mi nom e	
4. CONTINUATION: Effectiveness of the Financing Statement identification	ed above with respect	to the security interest(s) of	Secured Party	authorizing this Con	tinuation Statement is
continued for the additional period provided by applicable law	od dbovo miin roopoot	to the security interest(s) or	·	additionzing time con	mindation Statement is
5. PARTY INFORMATION CHANGE:					
	k <u>one</u> of these three bo	ixes to:			
	CHANGE name and/or a	ddress: CompleteADD	name: Comple	te itemDELETE	name: Give record name
	tem 6a or 6b; <u>and</u> item 7		r 7b, <u>and</u> item 7	c to be dete	eted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAME	Change - provide only	one name (6a or 6b)	- · - · · · · · · · · · · · · · · · · ·		
		1			
OR 6b. INDIVIDUAL'S SURNAME	FIRST DEDCOM	AL MARKE	LADDITIO	ALAL ALAAF (O) (IAUTLA	L(O) TOLIEE(V
OD, HADIAIDONE O SÓICHANNE.	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIA	L(S) SUFFIX
		·		<u> </u>	<u></u>
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party In Ta. ORGANIZATION'S NAME	formation Change - provide of	nly <u>one</u> name (7a or 7b) (use exact, t	full name; do not on	nit, modify, or abbreviate a	ny part of the Debtor's name)
TO ONGANIZATIONS NAME			_		
OR 7b. INDIVIDUAL'S SURNAME					
TO. INDIVIDUAL S SURINAINE		,			
INDIVIDUALIO FIDOT DEDOCALAL ALABE					
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 boxes:	ADD collateral	DELETE collateral	RESTATE C	overed collateral	ASSIGN collateral
Indicate collateral:					
	•				
					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THI		-	b) (name of As	signor, if this is an As	signment)
If this is an Amendment authorized by a DEBTOR, check here and prove 9a. ORGANIZATION'S NAME	vide Haitle of Authorizin	g Denioi			
American Commerce Bank NA		•			
OR 9b. INDIVIDUAL'S SURNAME	FIDET DEDOON	AL NIAME	ADDITIO	MAL NIABATEZONARITA	(C) CHEEK
JOS. INVOINTIBUONE O GUINIANIE	FIRST PERSON	UF IAWIAIE	ADDITIO	NAL NAME(S)/INITIA	L(S) SUFFIX
					<u> </u>
10. OPTIONAL FILER REFERENCE DATA:					
IRA Holdings, INC.					