CC FINANCING STATEMENT AMENDM	ENT				
LLOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional) LATOYA FREEMAN					
E-MAIL CONTACT AT FILER (optional) LOANS@SPIREENERGY.COM					
SEND ACKNOWLEDGMENT TO: (Name and Address)					
SPIRE ALABAMA INC 20 20TH STREET SOUTH BIRMINGHAM, AL 35233					
		THE ADOM	- 60465 16 50		ANI V
INITIAL FINANCING STATEMENT FILE NUMBER		1b. This FINANCING S	TATEMENT AME	R FILING OFFICE USE NDMENT is to be filed [fo	
0200306000089380		Filer: <u>attach</u> Amendm	ent Addendum (Fo	m UCC3Ad) <u>and</u> provide Deb	or's name in ite
✓ TERMINATION: Effectiveness of the Financing Statement identified Statement	d above is terminated	I with respect to the security	interest(s) of Sec	cured Party authorizing this	s Termination
ASSIGNMENT (full or partial): Provide name of Assignee in item 7. For partial assignment, complete items 7 and 9 and also indicate affe			name of Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing Statement identification continued for the additional period provided by applicable law	ied above with respe	ct to the security interest(s)	of Secured Party	authorizing this Continuat	ion Statemen
PARTY INFORMATION CHANGE:					
/ IDUN UITO UI UITOO INU DUXOO. ———————————————————————————————————	ck <u>one</u> of these three CHANGE name and/o	r address: Complete 💹 🖊	DD name: Comple	te itemDELETE name:	
his Change affectsDebtor <u>or</u> Secured Party of record CURRENT RECORD INFORMATION: Complete for Party Information			or 7b, <u>and</u> item 7	to be deleted in	item 6a or 6b
6a. ORGANIZATION'S NAME					
6b. INDIVIDUAL'S SURNAME	FIRST PERSO	ONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
TUCKER	CHRIS		A		
CHANGED OR ADDED INFORMATION: Complete for Assignment or Party I	nformation Change - provid	le only <u>one</u> name (7a or 7b) (use exac	ct, full name; do not or	nit, modify, or abbreviate any part	of the Debtor's na
7a. ORGANIZATION'S NAME					
7b. INDIVIDUAL'S SURNAME					
IAIDO COLLADO CADOS DEDOCALAS ASANTE					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	OITV		OTATE	IDOCTAL CODE	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS	CITY PELHA	M	STATE	POSTAL CODE 35124	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS		M DELETE collateral	AL	35124	COUNTRY
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 6 WILD TIMBER PKWY	PELHA		AL	35124	COUNTR
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 6 WILD TIMBER PKWY COLLATERAL CHANGE: Also check one of these four boxes:	PELHA		AL	35124	COUNTR
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INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 86 WILD TIMBER PKWY COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME OF SECURED PARTY OF RECORD AUTHORIZING THE fithis is an Amendment authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR, check here and provided the second authorized by a DEBTOR.	ADD collateral	DELETE collateral Provide only one name (9a o	RESTATE	35124 overed collateral	COUNTRY US ASSIGN colla
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INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) MAILING ADDRESS 66 WILD TIMBER PKWY COLLATERAL CHANGE: Also check one of these four boxes: Indicate collateral: NAME of SECURED PARTY of RECORD AUTHORIZING THe fithis is an Amendment authorized by a DEBTOR, check here and professional professio	ADD collateral IS AMENDMENT: ovide name of authoric	Provide only <u>one</u> name (9a ozing Debtor	RESTATE of 9b) (name of As	overed collateral signor, if this is an Assignm	COUNTRY US ASSIGN collar ent)



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
08/18/2021 03:55:47 PM
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