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FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional)					
Belinda Speegle (256) 280-9202					
B. E-MAIL CONTACT AT FILER (optional) bspeegle@myprogressbank.com			F21. J J D .		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	·····		Filed and Re Official Publ		
The restriction of the first terms of the first terms.			Judge of Pro Clerk	bate, Shelby County Alab	ama, County
			Shelby Coun	• .	
Progress Bank and Trust PO Box 1905			08/31/2021 1 \$.00 JOANN		
Decatur, AL 35602		LABANIE	20210831000	424320	au
					Wet.
		THE ABO	VE SPACE IS FO	R FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20210628000312110		(or recorded) in i	the REAL ESTATE	NDMENT is to be filed (for RECORDS m UCC3Ad) <u>and</u> provide Debt	_
2. TERMINATION: Effectiveness of the Financing Statement identified above Statement	ve is terminated w	ith respect to the secur	ity interest(s) of Se	cured Party authorizing this	s Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7 For partial assignment, complete items 7 and 9 and also indicate affected of	b, <u>and</u> address of collateral in item 8	Assignee in item 7c <u>an</u>	d name of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified at continued for the additional period provided by applicable law	bove with respect	to the security interest(s) of Secured Party	authorizing this Continuat	ion Statement is
5. PARTY INFORMATION CHANGE:					
Check <u>one</u> of these two boxes: <u>AND</u> Check <u>on</u>	g of these three bo				
This Change affects Debtor or Secured Party of record litem 6	NGE name and/or a 3a or 6b; <u>and</u> item 7		ADD name: Complete 7a or 7b, <u>and</u> item 7	te item DELETE name; to be deleted in	Give record name item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Chan	ige - provide only <u>c</u>				
6a. ORGANIZATION'S NAME Scott Homos & land Dovolonment Character Te					
Scott Homes & land Development Group In 6b. INDIVIDUAL'S SURNAME			,		
OD' MOINIDONE & SOKMANE	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7 CHANGED OR ADDED INSCIPANTION: Complete for Assistance to D. J. J. J.					
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informat 7a. ORGANIZATION'S NAME	tion Change - provide o	nly <u>one</u> name (7a or 7b) (use e	xact, full name; do not or	nit, modify, or abbreviate any part o	of the Debtor's name)
OR 75. INDIVIDUAL'S SURNAME			•••••	······································	
INDIVIDUAL'S FIRST PERSONAL NAME					······································
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				· · · · · · · · · · · · · · · · · · ·	SUFFIX
7c. MAILING ADDRESS	‡ CITY				
	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD	D collateral	DELETE collateral	RESTATE c	overed collateral	ASSIGN collateral
Indicate collateral:					
 NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN If this is an Amendment authorized by a DEBTOR, check here and provide r 	MENDMENT: Pr name of authorizing	ovide only <u>one</u> name (9a) Debtor	or 9b) (name of Ass	signor, if this is an Assignme	ent)
9a. ORGANIZATION'S NAME					
9a. ORGANIZATION'S NAME Progress Bank and Trust	FIRST PERSON/	\L NAME	ADDITIO	VAL NAME(S)/INITIAL/S)	SUFFIX
9a. ORGANIZATION'S NAME Progress Bank and Trust	FIRST PERSON/	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
9a. ORGANIZATION'S NAME Progress Bank and Trust	FIRST PERSON/	L NAME	ADDITIO	VAL NAME(S)/INITIAL(S)	SUFFIX
9a. ORGANIZATION'S NAME Progress Bank and Trust OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON/	L NAME	ADDITIO	VAL NAME(S)/INITIAL(S)	SUFFIX