



20211026000519530 1/2 \$39.00 Shelby Cnty Judge of Probate, AL 10/26/2021 01:35:44 PM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS								
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331								
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com								
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 3	1153 - CAPI	TAL ONE						
Lien Solutions P.O. Box 29071	83101529							
Glendale, CA 91209-9071	ALAL							
	FIXTU	JRE _I						
File with: Shelby, AL	<u>. </u>	J 				R FILING OFFICE		
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20171031000394510 10/31/2017 CC AL Shelby	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13							
2. TERMINATION: Effectiveness of the Financing Statement identification.	entified above is	s terminated with	respect to the security into	erest(s) c	of Secure	d Party authorizing th	nis Termir	nation
3. ASSIGNMENT (full or partial): Provide name of Assignee in in For partial assignment, complete items 7 and 9 and also indicates a second complete items 7 and 9 and a second complete items 7 and 9 and 9 and 1 and				ne of Ass	signor in i	tem 9		
4. CONTINUATION: Effectiveness of the Financing Statement is continued for the additional period provided by applicable law		with respect to	the security interest(s) of S	ecured F	arty auth	orizing this Continua	tion State	ment is
5. X PARTY INFORMATION CHANGE:								
Check one of these two boxes:		of these three box GE name and/or a		DD name	: Complet nd item 7d	e item DELETE note be delet		e record name
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Inform		· .		a or 70, <u>a</u>	na kem 70	to be delet	eu iii iteiii	QA OI OD
6a. ORGANIZATION'S NAME FANNIE MAE								
6b. INDIVIDUAL'S SURNAME	SURNAME FIRST PERSO				ADDITIONAL NAME(S)/INITIAL(S))	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or P	Party Information Cha	ange - provide only	one name (7a or 7b) (use exact, f	full name; de	o not omit, n	nodify, or abbreviate any pa	art of the Det	otor's name)
7a. ORGANIZATION'S NAME Fannie Mae								
OR 7b. INDIVIDUAL'S SURNAME								
INDIVIDUAL'S FIRST PERSONAL NAME								
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	<u> </u>							SUFFIX
7c. MAILING ADDRESS CITY					STATE	POSTAL CODE		COUNTRY
c/o Capital One, National Association 2 Bethesda Me 10th Floor, Attention: Asset Management	tro Center,	Bethesda			MD	20814		USA
8. COLLATERAL CHANGE: Also check one of these four b	oxes: ADI	D collateral	DELETE collateral	RE	STATE	covered collateral	☐ ASS	SIGN collateral
Indicate collateral:								
			•					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZ	INC THE AND	ENIONAENIT. D	rovido only one name (0a c	or Oh\ /na	ma of Ass	ignor if this is an Ass	eianment)	
If this is an Amendment authorized by a DEBTOR, check here		name of authoriz), OD) (III				
9a. ORGANIZATION'S NAME FANNIE MAE								
OR 9b. INDIVIDUAL'S SURNAME	<u> </u>	FIRST PERSON	IAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S	5)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: CA	AHABA PRO	PERTY OWN	NER I LLC, as Tenant-	-In-Con	nmon			
83101529 1916-416						Rader, Scott		

83101529



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	C FINANCING STATEMENT AMENDMENT ALLOW INSTRUCTIONS	ADDEND	UM			
11.	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amend 171031000394510 10/31/2017 CC AL Shelby	dment form				
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Ar 12a. ORGANIZATION'S NAME	mendment form				
	FANNIE MAE					
OR 12b. INDIVIDUAL'S SURNAME						
	FIRST PERSONAL NAME					
ADDITIONAL NAME(S)/INITIAL(S)		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	SUFFIX			
13.	Name of DEBTOR on related financing statement (Name of a current Debtor o one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or al	•	_	purposes only in som	-	
	13a. ORGANIZATION'S NAME CAHABA PROPERTY OWNER I LLC, as Tenant-In-Co	mmon				
OR	13b. INDIVIDUAL'S SURNAME	FIRST PERSO	ONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
Sec	HABA MP LLC, as Tenant-In-Common - c/o Palin Enterprises, 2 cured Party Name and Address: nnie Mae - c/o Capital One, National Association 2 Bethesda Me This FINANCING STATEMENT AMENDMENT:	etro Center, 1	17. Descrip	tion of real estate:	anagement, Bethesda, MD 2	0814
	overs timber to be cut overs as-extracted collateral is filed a Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	as a fixture filing		ahaba Apar Riverview R	oad	

1916-416 Rader, Scott

FANNIE MAE

File with: Shelby, AL

18. MISCELLANEOUS: 83101529-AL-117 31153 - CAPITAL ONE MULTIFAM