					•		
UCC FINANCING STATEMENT AMENDME	NT						
FOLLOW INSTRUCTIONS			والم المالية		d Recorded Public Records		
A. NAME & PHONE OF CONTACT AT FILER (optional)				Judge of Clerk	f Probate, Shelb	y County Alabama, Co	unty
B. E-MAIL CONTACT AT FILER (optional)			لي مستحمر الأ	Shelby C	County, AL		
LOANS@SPIREENERGY.COM			(\)	1 :	22 10:08:56 AM		`
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		`	AHY.				٥.
SPIRE ALABAMA INC			•	** = 1 = 3 * * * * * * * * * * * * * * * * * *	00020150 1	/1 \$.00	Œ
20 20TH STREET SOUTH BIRMINGHAM, AL 35233				_		f Probate, AL	
	•			01/18/2022	2 10:08:56	AM FILED/CERT	
		THE ABOVE SPA	CE IS FO	R FILING OFFICE USE C	ONLY		
1a. INITIAL FINANCING STATEMENT FILE NUMBER		1b. 7 This FINANCING STATE	MENT AME	NDMENT is to be filed [for i	record]		
20180511000163750	<u>. — — — — — — — — — — — — — — — — — — —</u>	Filer: attach Amendment Ad	dendum (For	m UCC3Ad) and provide Debto	r's name in item 13		
2. TERMINATION: Effectiveness of the Financing Statement identified a Statement	above is terminated t	with respect to the security intere	st(s) of Sec	ured Party authorizing this	Termination		
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a	or 7b, <u>and</u> address o	of Assignee in item 7c <u>and</u> name	of Assignor	in item 9			
For partial assignment, complete items 7 and 9 and also indicate affects	ed collateral in item	1 8 					
4. CONTINUATION: Effectiveness of the Financing Statement identifies continued for the additional period provided by applicable law	d above with respec	ct to the security interest(s) of Sec	cured Party	authorizing this Continuatio	n Statement is		
5. PARTY INFORMATION CHANGE:				÷.			
Check one of these two boxes:	k <u>one</u> of these three b HANGE name and/or	r address: Complete —— ADD na	me: Comple o, <u>and</u> item 7	te item DELETE name: o	Give record name tem 8a or 8b		
This Change affects Debtor or Secured Party of record ite							
6a. ORGANIZATION'S NAME							
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX		
BANKS	DONAI	LD					
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Inf	ormation Change - provide	le only <u>one</u> name (7a or 7b) (use exact, full r	name; do not or	nit, modify, or abbreviate any part of	f the Debtor's name)		
7a. ÖRGANIZATION'S NAME							
7b. INDIVIDUAL'S SURNAME				<u> </u>			
INDIVIDUAL'S FIRST PERSONAL NAME							
INDIVIDUAL OF INCITATION OF THE INTERPRETATION OF THE INTERPRETATI							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			_		SUFFIX		
7 MARINO ADDEED	TCITY		STATE	POSTAL CODE	COUNTRY		
7c. MAILING ADDRESS 1105 WEYBRIDGE RD	PELHA	<b>AM</b>	AL	35124	US		
	ADD collatoral	DELETE collateral	RESTATE C	covered collateral	ASSIGN collatoral		
Indicate collateral:							
				-	•		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE	IS AMENDMENT:	Provide only one name (9a or 9b)	(name of As	signor, if this is an Assignme	ent)		
If this is an Amendment authorized by a DEBTOR, check here 📝 and pro-	vide name of authoriz	zing Debtor	<del> </del>		<b>.</b>		
98. ORGANIZATION'S NAME SPIRE ALABAMA INC							
9b. INDIVIDUAL'S SURNAME	FIRST PERSO	ONAL NAME	ADDITIO	MAL NAME(S)/INITIAL(S)	SUFFIX		
10. OPTIONAL FILER REFERENCE DATA:				·			
FILING OFFICE COPY — UCC FINANCING STATEMENT AMEN	IDMENT (Form L	International Ass UCC3) (Rev. 04/20/11)	sociation	of Commercial Adminis	strators (IACA)		
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