UCC FINANCING STATEMENT

EOLLOW INSTRUCTIONS

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| FULLOW INSTRUCTIONS | | | | | |
|---|--|--------------------------------------|-------------|--|-------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294 | | | | | |
| B. E-MAIL CONTACT AT FILER (optional) | | | | | |
| SPRFiling@cscglobal.com | | | | | |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address) | | | | | |
| 2418 77455 | | | | | |
| CSC | | | | | |
| 801 Adlai Stevenson Drive | | | | | |
| Springfield, IL 62703 | Filed In: Alabama | | | | |
| | (Shelby) | | | | |
| | | THE ABOVE SPACE | CE IS FO | R FILING OFFICE USE | ONLY |
| 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use e | xact, full name; do not omit, mo | dify, or abbreviate any part of t | he Debtor | 's name); if any part of the In | dividual Debtor's |
| | provide the Individual Debtor in | | | | |
| 1a. ORGANIZATION'S NAME | | | | | |
| | | | | | |
| OR 1b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | | ADDITIO | NAL NAME(\$)/INITIAL(\$) | SUFFIX |
| Harden | James | | Eric | | |
| 1c. MAILING ADDRESS 710 Navajo Trl | CITY | | STATE | POSTAL CODE | COUNTRY |
| i io itavajo in | Alabaster | | AL | 35007 | USA |
| | | | | | |
| 2. DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use expanded on the provide only one between the provide only one one of the provide only one of the provide one of the p | xact, full name; do not omit, mo I provide the Individual Debtor ii | | | | |
| | provide the individual Debtor ii | | anong or | atement Addendam (Form Ot | |
| 2a. ORGANIZATION'S NAME | | | | | |
| OR OL DIENIS CLIENTALE | I ELEGE BERGOLLAL A | | ABBITIO | NAL NANE (O) (INITIAL (O) | laee.v |
| 2b. INDIVIDUAL'S SURNAME | FIRST PERSONAL N | FIRST PERSONAL NAME | | ADDITIONAL NAME(S)/INITIAL(S) SUFFIX | |
| | | | | _ | |
| 2c. MAILING ADDRESS | CITY | | STATE | POSTAL CODE | COUNTRY |
| | | | | | |
| 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN | OR SECURED PARTY): Provide | e only <u>one</u> Secured Party name | e (3a or 3t | o) | |
| 3a. ORGANIZATION'S NAME Cross River Bank and its | successors and ass | igns c/o Marlette S | ervicin | g, LLC | |
| | | | | | |
| OR 3b. INDIVIDUAL'S SURNAME | FIRST PERSONAL N | NAME | ADDITIO | NAL NAME(S)/INITIAL(S) | SUFFIX |
| | | | | | |
| 3c. MAILING ADDRESS 3419 Silverside Road | CITY | | STATE | POSTAL CODE | COUNTRY |
| OTTO CITYCICIO I COUG | Wilmington | | DE | 19810 | USA |
| 4.001 ATEDAL | | | | | |
| 4. COLLATERAL: This financing statement covers the following collatera All fixtures now or hereafter securely and/or per | manently attached t | to the property iden | tified a | above, excludina p | ersonal |
| effects and household goods or appliances that | | | | | |
| Fixture Definition: An object physically and pern | | • • | | | ms that |
| _ | | | 1 | | |

any other part of the home. Proposed Fixtures include but not limited to: Built-in cabinets and shelving Bathroom vanities

Light fixtures

Indebtedness: \$27,500.00

| 5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) | being administered by a Decedent's Personal Representative |
|--|--|
| 6a. Check only if applicable and check only one box: | 6b. Check only if applicable and check only one box: |
| Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility | Agricultural Lien Non-UCC Filing |
| 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor Consignee/Consignor Seller/Buy | yer Bailee/Bailor Licensee/Licensor |
| 8 OPTIONAL FILER REFERENCE DATA: | |

have the following method of attachment; bolted, screwed, nailed, glued, or cemented onto the walls, floors, ceilings or

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UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here [9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Harden FIRST PERSONAL NAME James ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Eric THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS CITY POSTAL CODE COUNTRY STATE ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME POSTAL CODE COUNTRY STATE 11c. MAILING ADDRESS CITY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) is filed as a fixture filing covers timber to be cut covers as-extracted collateral 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): James Eric Harden APN: 138341004029000 710 Navajo Trl Property Address: Alabaster, AL 35007 710 Navajo Trl **Shelby County** Alabaster, AL 35007 Shelby County BLK:1 DIST:02 CITY/MUNI/TWP:ALABASTER SUBD:NAVAJO HILLS 1ST SECTOR SEC/TWN/RNG/MER:SEC 34 TWN 20S 17. MISCELLANEOUS:

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UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here [9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME Harden FIRST PERSONAL NAME James ADDITIONAL NAME(S)/INITIAL(S) SUFFIX Eric THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 10c. MAILING ADDRESS CITY POSTAL CODE COUNTRY STATE ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME or 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX POSTAL CODE COUNTRY 11c. MAILING ADDRESS CITY STATE 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) is filed as a fixture filing covers timber to be cut covers as-extracted collateral 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): RNG 03W SEC/TWNSHP/RAN 34 20S 03W NBRHD: 02 NAVAJO HILLS R-2 MAP REF:MP 05 PG 018 Filed and Recorded Official Public Records Judge of Probate, Shelby County Alabama, County Clerk Shelby County, AL 10/18/2022 09:30:09 AM **\$82.25 BRITTANI** 20221018000392960

FILING OFFICE COPY — UCC FINANCING STATEMENT ADDENDUM (Form UCC1Ad) (Rev. 04/20/11)

17. MISCELLANEOUS: