

20230406000096430 04/06/2023 10:44:25 AM

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS		UCC6 1/3				
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fa	x: 818-662-4141					
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com						
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 46322 - St	unTrust Bank					
Lien Solutions P.O. Box 29071	73160					
Glendale, CA 91209-9071 ALA FIX	L TURE _I					
File with: Shelby, AL		THE ABOVE SPA	CE IS FOR	R FILING OFFICE	E USE ON	ILY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20220518000201980 BK 30 PG 86 5/18/2022 CC AL S	helby	1b. This FINANCING STATE (or recorded) in the REAL Filer: attach Amendment Add	MENT AMEN L ESTATE R dendum (Form	NDMENT is to be file ECORDS UCC3Ad) <u>and</u> provide	ed [for recor	rd] ne in item 13
2. X TERMINATION: Effectiveness of the Financing Statement identified about the Statement	ve is terminated with	respect to the security interest(s)) of Secured	Party authorizing th	is Terminat	ion
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 affects		-	ssignor in ite	em 9		
4. CONTINUATION: Effectiveness of the Financing Statement identified at continued for the additional period provided by applicable law	pove with respect to t	he security interest(s) of Secured	Party autho	rizing this Continuat	ion Stateme	ent is
5. PARTY INFORMATION CHANGE:						
Check one of these two boxes.	<u>one</u> of these three box HANGE name and/or a		ne: Complete	item DELETE n	ame: Give r	ecord name
			<u>and</u> item 7c	to be delet	ed in item 6a	a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Chan 6a. ORGANIZATION'S NAME	ge - provide only <u>one</u>	name (6a or 6b)				
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIONA	L NAME(S)/INITIAL(S)	SU	IFFIX
ELWARD 7 OHANGER OR ARREST INFORMATION: 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	JOHN					
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information 7a. ORGANIZATION'S NAME	on Change - provide only g	one name (/a or /b) (use exact, full name;	do not omit, mo	dity, or abbreviate any pa	rt of the Debtor	"s name)
OR 7b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL OF INCOUNTE INAIVIL						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SU	IFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	СО	UNTRY
			<u> </u>			
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	■ DELETE collateral	RESTATE co	vered collateral		3N collatera
Indicate collateral:						
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A lifthis is an Amendment authorized by a DEBTOR, check here and prove	AMENDMENT: Proide name of authorizing		ame of Assig	nor, if this is an Assi	gnment)	
9a. ORGANIZATION'S NAME	ide name or authorizh	ig Debioi				
SERVICE FINANCE COMPANY, LLC						
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONA	AL NAME	ADDITIONA	L NAME(S)/INITIAL(S)	SU	IFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: ELWARD, J	IOHN					

Prepared by Lien Solutions, P.O. Box 29071, Glendale, CA 91209-9071 Tel (800) 331-3282

2988325

92273160

	item 1a on Amendment form CC AL Shelby			
NAME OF PARTY AUTHORIZING THIS AMENDMENT: Sam	ne as item 9 on Amendment form			
12a. ORGANIZATION'S NAME SERVICE FINANCE COMPANY, LLC				
12b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE S	SPACE IS FOR FILING OFFICE US	E ONLY
Name of DEBTOR on related financing statement (Name of a one Debtor name (13a or 13b) (use exact, full name; do not one	•	-	_	13): Provide only
13a. ORGANIZATION'S NAME				
13b. INDIVIDUAL'S SURNAME ELWARD	FIRST PERSONAL NAME JOHN		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
ADDITIONAL SPACE FOR ITEM 8 (Collateral): otor Name and Address: NARD, JOHN - 116 HASTINGS LN , ALABASTE cured Party Name and Address: RVICE FINANCE COMPANY, LLC - 555 SOUTH		A RATON, FL 33432		

15. This FINANCING STATEMEN	T AMENDMENT:	
covers timber to be cut	covers as-extracted collateral	is filed as a fixture filing
16. Name and address of a RECC (if Debtor does not have a reco	ORD OWNER of real estate describe ord interest):	ed in item 17
ELWARD ANGELA	₹ & CHRIS	
116 HASTINGS LN	1	

17. Description of real estate:

PARCEL ID: 23 2 04 0 007 041.000

ELWARD 116 HASTINGS LN MAYLENE, AL 35114

LEGAL DESCRIPTION: LOT 284, ACCORDING TO THE SURVEY OF CEDAR GROVE AT STERLING GATE SECTOR 2,

[See Exhibit for Real Estate]

18. MISCELLANEOUS: 92273160-AL-117 46322 - SunTrust Bank

MAYLENE, AL 35114

SERVICE FINANCE COMPANY, LLC

File with: Shelby, AL

2988325

Debtor: ELWARD, JOHN

Exhibit for Real Estate

17. Description of real estate: Continued

PHASE 6, AS RECORDED IN MAP BOOK 30, PAGE 86, IN THE OFFICE OF THE JUDGE OF PROBATE OF SHELBY COUNTY, ALABAMA.

INSTRUMENT: 20200925000432690 DATE:09/25/2020

Page No:

86

Book No:

30



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
04/06/2023 10:44:25 AM
\$.00 PAYGE
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