UCC FINANCING STATEMENT AMENDMEN FOLLOW INSTRUCTIONS				
A. NAME & PHONE OF CONTACT AT FILER (optional)  RACHEL ADAMS				
B. E-MAIL CONTACT AT FILER (optional)				
LOANS@SPIREENERGY.COM  C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
		(BQ)	Filed and Recorded Official Public Records	Commerc
SPIRE ALABAMA INC 20 20TH STREET SOUTH			Judge of Probate, Shelby County Alabama, C Clerk Shelby County, AL	Jounty
BIRMINGHAM, AL 35233		JEARN NO	05/09/2023 10:33:18 AM S.00 PAYGE	
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			CE IS FOR FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20221123000432130		(or recorded) in the REAL	MENT AMENDMENT is to be filed [for ESTATE RECORDS lendum (Form UCC3Ad) <u>and</u> provide Debto	
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement				
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 6			f Assignor in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law				
5. PARTY INFORMATION CHANGE:				
 Check one of these two boxes: <u>AND</u> Check <u>on</u>	<u>ne</u> of these three bo NGE name and/or a		e: Complete item DELETE name:	Give record name
This Change affectsDebtor <u>or</u> Secured Party of recorditem 6	6a or 6b; <u>and</u> item 7	a or 7b <u>and</u> item 7c 7a or 7b,	and item 7c to be deleted in i	
6. CURRENT RECORD INFORMATION: Complete for Party Information Char 6a. ORGANIZATION'S NAME	nge - provide only <u>c</u>	name (6a or 6b)		
OR Ch. INDUSTRIALIS SURNIANAE	FIDOT DEDOON	A.I. N.I.A.R.I.	ADDITIONAL MARKE (OMBUTIAL (O)	- CLIEFIX
JOHNSON	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)  D	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	ation Change - provide o	ak, ana nama /Za ay Zh\ /waa awaak full aa	no, de pet perit expelific es abbenidos per esta	
7a. ORGANIZATION'S NAME				
		niy <u>one</u> name (7a or 7b) (use exact, full na	me; do not omit, modily, or abbreviate any part o	f the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME		niy <u>one</u> name (7 a or 76) (use exact, full na	me; do not omit, modily, or appreviate any part o	f the Debtor's name)
76. INDIVIDUAL'S SURNAME		nny <u>one</u> name (7a or 7b) (use exact, iuii na	me; do not omit, modily, or appreviate any part o	f the Debtor's name)
7b. INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME		nny <u>one</u> name (7 a or 76) (use exact, full na	me; do not omit, modily, or appreviate any part o	f the Debtor's name)
76. INDIVIDUAL'S SURNAME		only <u>one</u> name (/a or /b) (use exact, full na	me; do not omit, modny, or appreviate any part o	f the Debtor's name)  SUFFIX
INDIVIDUAL'S SURNAME  INDIVIDUAL'S FIRST PERSONAL NAME	CITY	one name (/a or /b) (use exact, full na	STATE POSTAL CODE	
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	CITY BIRMIN			SUFFIX
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7c. MAILING ADDRESS  211 CALUMET DR		GHAM	STATE POSTAL CODE AL 35242	SUFFIX
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7c. MAILING ADDRESS  211 CALUMET DR	BIRMIN	GHAM	STATE POSTAL CODE AL 35242	SUFFIX COUNTRY US
INDIVIDUAL'S FIRST PERSONAL NAME  INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  7c. MAILING ADDRESS  211 CALUMET DR  8.   COLLATERAL CHANGE: Also check one of these four boxes: AD	BIRMIN	GHAM	STATE POSTAL CODE AL 35242	SUFFIX COUNTRY US
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