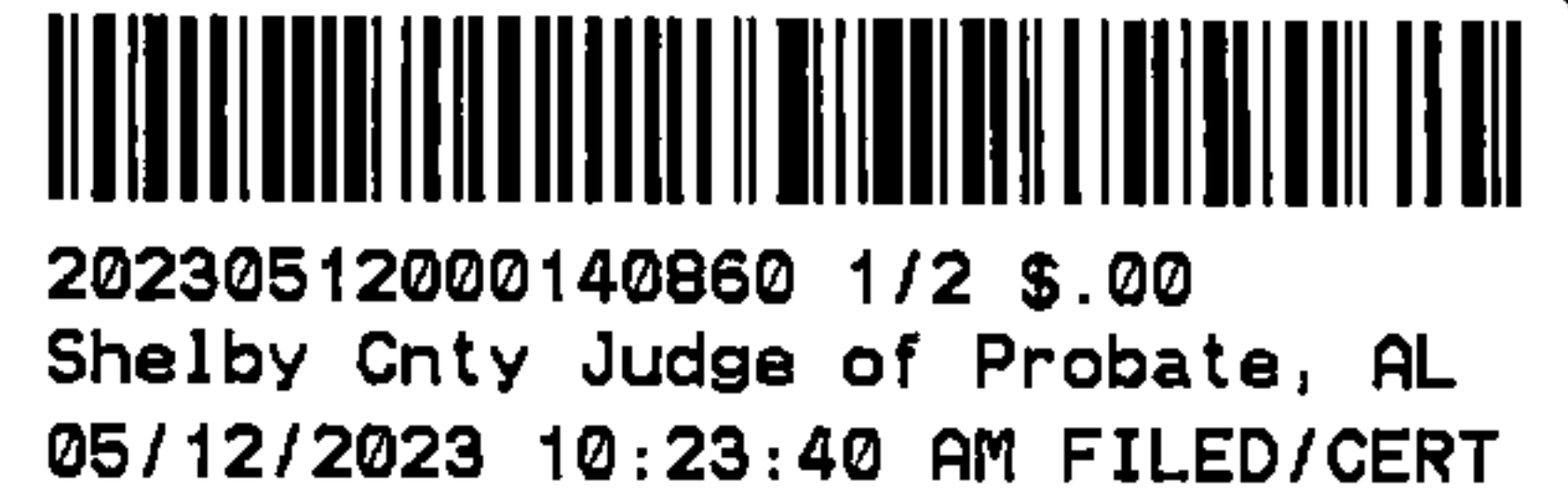


STATE OF ALABAMA)

SHELBY COUNTY)



FULL SATISFACTION OF RECORDED LIEN

The North Shelby County Fire and Emergency Medical District, a public corporation, files this statement in writing, verified by oath of Guy R. Sipe, an employee or officer of the District, who has personal knowledge of the facts herein set forth:

Know All Men by These Presents, That, the undersigned, North Shelby County Fire and Emergency Medical District, acknowledges full payment of the indebtedness secured by the following property, situated in Shelby County, Alabama, to-wit:

Lien Instrument Number: 20230414000106460

Address: 249 INDIAN FOREST TRAIL INDIAN SPRINGS AL 35124

Legal Description: Lot#:21 Blk:3 Book:6 Pg:11 Sub: INDIAN FOREST ESTATES SECOND SECTOR

The record owner(s) or proprietor(s) of the aforementioned Parcel or Property is: JESSICA L MANFREDI

In Witness Whereof, the undersigned has caused these presents to be executed this the 5th day of May 2023.

North Shelby Fire and Emergency Medical District

A handwritten signature in black ink, appearing to read "Guy R. Sipe", written over a horizontal line.

This Instrument Prepared By:
Guy R. Sipe, Fire Chief
4617 Valleydale Road
Birmingham, Alabama 35242



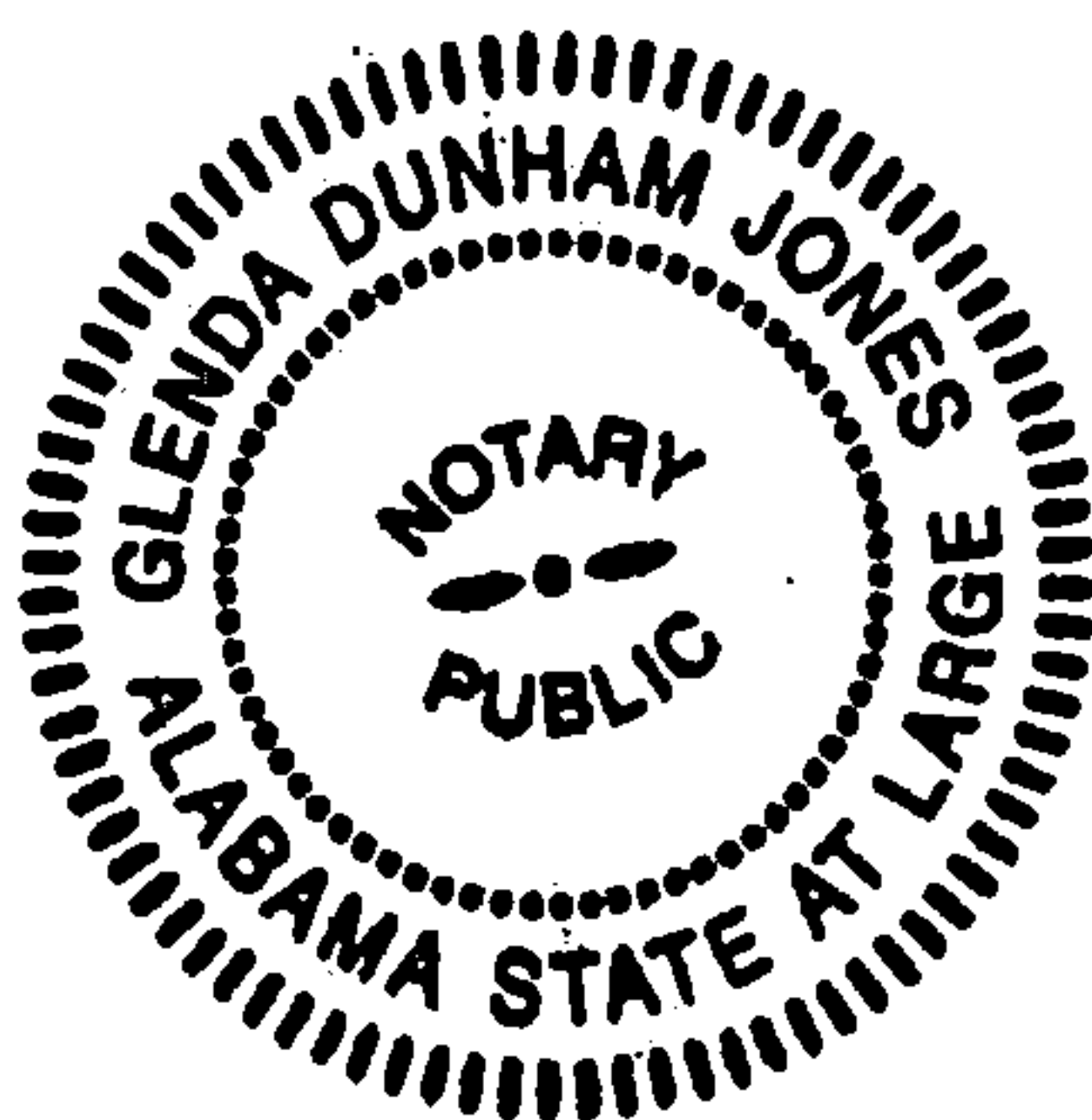
20230512000140860 2/2 \$.00
Shelby Cnty Judge of Probate, AL
05/12/2023 10:23:40 AM FILED/CERT

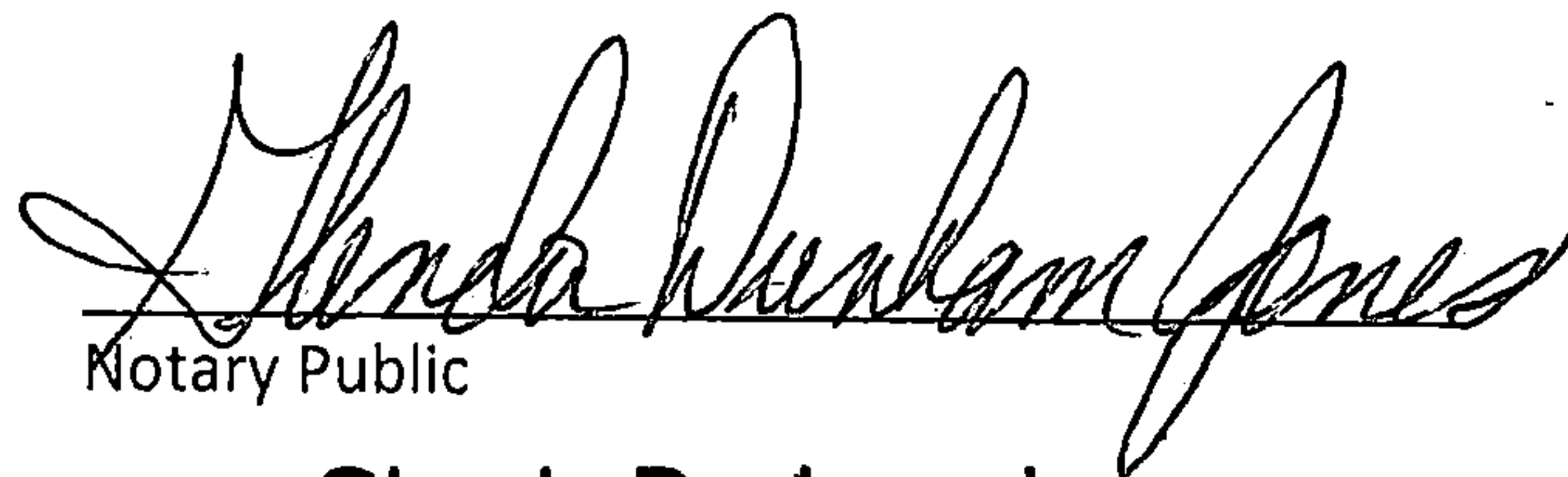
STATE OF ALABAMA)

SHELBY COUNTY)

I, the undersigned, a notary Public in and for said County in the State, hereby certify that Guy R. Sipe, an employee or officer of the North Shelby County Fire and Emergency Medical District, whose name is signed to the foregoing Lien, and who is known to me, acknowledged before me on this day that, being informed of the contents of the above and foregoing Lien, in such capacity for the said District, executed the same voluntarily on the date the same bears date.

Given under my hand and official seal of office this the 5th day of may, 2023.




Notary Public

Glenda Dunham Jones
My Commission Expires
12/5/2023