20230623000186250 06/23/2023 08:04:49 AM UCC6 1/2

			-	UCC6 1/2	
UCC FINANCING STATEMENT AMENI	MENT				
FOLLOW INSTRUCTIONS	· · · · · · · · · · · · · · · · · · ·	1			
A. NAME & PHONE OF CONTACT AT FILER (optional)  CATHY JOHNSON 205-668-3577					
B. E-MAIL CONTACT AT FILER (optional)					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
CENTRAL STATE BANK					
P O BOX 180					
CALERA, AL 35040	_				
		TUE ABOVE O	enace le Eol	D EILING GEEIGE H	SE ONI V
1a. INITIAL FINANCING STATEMENT FILE NUMBER	<u> </u>	b. This FINANCING STA	-	R FILING OFFICE US  NDMENT is to be filed	
20190614000211140		(or recorded) in the r	KEWE ESTATE L	RECORDS m UCC3Ad) <u>and</u> provide D	
2. TERMINATION: Effectiveness of the Financing Statement ide	entified above is terminated w	rith respect to the security in	terest(s) of Sec	ured Party authorizing	this Termination
Statement		A = = ! = = =		in Ham O	
<ol> <li>ASSIGNMENT (full or partial): Provide name of Assignee in its For partial assignment, complete items 7 and 9 and also indicate</li> </ol>			me of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law	identified above with respect	to the security interest(s) of	Secured Party	authorizing this Contin	uation Statement is
5. PARTY INFORMATION CHANGE:				<u> </u>	· · · · · · · · · · · · · · · · · · ·
	Check one of these three bows one of these three box one of the box one of the box one of these three box one of the box one		name: Comple	te item  — DELETE nar	me: Give record name
This Change affects Debtor or Secured Party of record		ddress: Complete 'a or 7b <u>and</u> item 7c 7a c	or 7b, <u>and</u> item 7	to be deleted	d in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Infor 6a. ORGANIZATION'S NAME	mation Change - provide only	one name (6a or 6b)		· · · · · ·	
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S	S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment of	r Party Information Change - provide	only <u>one</u> name (7a or 7b) (use exact,	full name; do not or	nit, modify, or abbreviate any p	part of the Debtor's name)
7a. ORGANIZATION'S NAME					
OR 75. INDIVIDUAL'S SURNAME	·-·-	·	<del>-</del>		<del></del>
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	······································	· <del>.</del> .	<del></del>		SUFFIX
· · · · · · · · · · · · · · · · · · ·					
7c. MAILING ADDRESS	CITY	<del></del>	STATE	POSTAL CODE	COUNTRY
				<u> </u>	<u></u> .
8. COLLATERAL CHANGE: Also check one of these four boxes	s: ADD collateral	DELETE collateral	RESTATE	overed collateral	ASSIGN collatera
Indicate collateral:					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZI	NG THIS AMENDMENT:	Provide only one name (9a or	9b) (name of As	signor, if this is an Assic	nment)
If this is an Amendment authorized by a DEBTOR, check here	and provide name of authorizi		, ,		- • • · · · · · · · · · · · · · · · · ·
9a. ORGANIZATION'S NAME  CENTRAL STATE BANK					
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(	S) SUFFIX
·				·	
10. OPTIONAL FILER REFERENCE DATA:			· · · · · · · · · · · · · · · · · · ·		
RL13649					
		International	Association (	of Commercial Adn	ninistrators (IAC/

	INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1	1a on Amendment for	î <b>n</b> î			
20	0190614000211140		<b></b>			
	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as i	item 9 on Amendment	t form			
	12a. ORGANIZATION'S NAME  CENTRAL STATE BANK					
	CENTRAL STATE DAINE	<del> </del>	······································			
· ·	· · · · · · · · · · · · · · · · · · ·					
OR	12b. INDIVIDUAL'S SURNAME	· ·				
	TED. INDIVIDONE O CONTINUE					
	FIRST PERSONAL NAME	<del></del>				
-	ADDITIONAL NAME(S)/INITIAL(S)	•	SUFFIX			
٠				THE ABOVE	SPACE IS FOR FILING OFFICE	USE ONLY
	Name of DEBTOR on related financing statement (Name of a curre one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, one					13): Provide or
	13a. ORGANIZATION'S NAME  LOVELADY PROPERTIES LLC					
OR	13b. INDIVIDUAL'S SURNAME	FIRST PER	SONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14.	ADDITIONAL SPACE FOR ITEM 8 (Collateral):		<del> ;</del> -			<u> </u>
	A B V M	Official I Judge of Clerk Shelby C 06/23/202 \$.00 JOA	ounty, AL 23 08:04:49	helby County  AM	Alabama, County	5. B.
		Official I Judge of Clerk Shelby C 06/23/202 \$.00 JOA	Public Reco Probate, S ounty, AL 23 08:04:49 NN	helby County  AM	Alabama, County	5. Beyol
	AH.N.	Official I Judge of Clerk Shelby C 06/23/202 \$.00 JOA	Public Records Probate, Sounty, AL 23 08:04:49 NN 3000186250	helby County  AM		5. Beyol
15.	This FINANCING STATEMENT AMENDMENT:  Covers timber to be cut	Official I Judge of Clerk Shelby C 06/23/202 \$.00 JOA 20230623	Public Recorder, Sounty, AL 23 08:04:49 NN 3000186250	helby County  AM		5. Beyl
15.	This FINANCING STATEMENT AMENDMENT:	Official I Judge of Clerk Shelby C 06/23/202 \$.00 JOA 20230623	Public Recorder, Sounty, AL 23 08:04:49 NN 3000186250	helby County  AM		5. Beyol
15.	This FINANCING STATEMENT AMENDMENT:  Covers timber to be cut Covers as-extracted collateral I  Name and address of a RECORD OWNER of real estate described in item	Official I Judge of Clerk Shelby C 06/23/202 \$.00 JOA 20230623	Public Recorder, Sounty, AL 23 08:04:49 NN 3000186250	helby County  AM		5. Beyol