UCC FINANCING STATEMENT				
FOLLOW INSTRUCTIONS A NAME & DHONE OF CONTACT AT ELLER (aptional)				
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)				
SPIRE ALABAMA INC.				
20 20TH STREET SOUTH				
BIRMINGHAM, AL 35233				
			R FILING OFFICE USE	
1. DEBTOR'S NAME : Provide only <u>one</u> Debtor name (1a or 1b) (use exact, fundame will not fit in line 1b, leave all of item 1 blank, check here and provide	ull name; do not omit, modify, or abbreviate an te the Individual Debtor information in item 1 0			
1a. ORGANIZATION'S NAME				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	LADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
IQAL	TINA			30111
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
617 CHEROKEE CIR	BIRMINGHAM	AL	35242	US
2. DEBTOR'S NAME: Provide only <u>one</u> Debtor name (2a or 2b) (use exact, fundame will not fit in line 2b, leave all of item 2 blank, check here and provide	ull name; do not omit, modify, or abbreviate an de the Individual Debtor information in item 1 0			
2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
ZD. INDIVIDUAL S SURNAIVIE	FIRST PERSONAL NAIVIE	ADDITIO	IVAL IVAIVIE(S)/IIVITIAL(S)	SOFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
• OFOURT DATE				
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SEC 3a. ORGANIZATION'S NAME	CURED PARTY): Provide only <u>one</u> Secured F	Party name (3a or 3b) 	
SPIRE ALABAMA INC.				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
20 20TH STREET SOUTH	BIRMINGHAM	AL	35233	US
4. COLLATERAL: This financing statement covers the following collateral:				
SURE COMFORT AC				
M# SA14AZ24AJ1NA S# W162341636				
COIL				
M# TCFZ2414STAAMC S# W132319923				
\$8000.00				
5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a Trus	st (see UCC1Ad, item 17 and Instructions)	being administe	red by a Decedent's Persona	al Representative
6a. Check only if applicable and check only one box:		6b. Check only	if applicable and check <u>only</u> o	one box:
Public-Finance Transaction Manufactured-Home Transaction 7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	A Debtor is a Transmitting Utility		tural Lien Non-UCC	Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor Seller/Br	UMO 2	ilee/Bailor Licen	rsee/Licensor

FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement;	if line 1h was left black				
because Individual Debtor name did not fit, check here	, if line 1b was left blank				
9a. ORGANIZATION'S NAME					
OR 9b. INDIVIDUAL'S SURNAME					
IQAL					
FIRST PERSONAL NAME					
TINA ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX				
ADDITIONAL NAIVILIONINI HALIO)	001117	THE A DOVE	SDACE	IS EOD EILING OFFICE	LISE ONLY
10. DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor name	or Debtor name that did not fit in			IS FOR FILING OFFICE Statement (Form UCC1) (use	
do not omit, modify, or abbreviate any part of the Debtor's name) and enter the			J	(,
10a. ORGANIZATION'S NAME					
OR 10b. INDIVIDUAL'S SURNAME					
TOD. INDIVIDUAL S SURNAIVIE					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
100 MAILING ADDESS	LOITY		Totate	TROCTAL CODE	COUNTRY
10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
11. ☐ ADDITIONAL SECURED PARTY'S NAME or ✓ ASSIG	NOR SECURED PARTY'S	S NAME: Provide o	nly one na	ame (11a or 11b)	
11a. ORGANIZATION'S NAME			5111.J <u>517.5</u> 11.		
FAST APPLIANCE SERVICES	T		T . = = . = . =		
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
2288 ROCKCREEK TRAIL	BIRMINGHAN		AL	35226	US
12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):					
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	A This FINANCING STATE	AENT-			
REAL ESTATE RECORDS (if applicable)	covers timber to be o		extracted	collateral 🔽 is filed as a	ı fixture filina
15. Name and address of a RECORD OWNER of real estate described in item 16	16. Description of real estate			<u></u> 10 11100 03 0	
(if Debtor does not have a record interest):	617 Cherokee Cir				
	Birmingham, AL 3	5124			
	Legal Description:				

Filed and Recorded Official Public Records Judge of Probate, Shelby County Alabama, County Clerk Shelby County, AL 06/27/2023 11:33:48 AM S51.00 BRITTANI 20230627000190870

alli 5. Beyd

Subdivision: BROKEN BOW 1ST ADD 2ND PHASE Block: 000 Lot: 57

Map Book: 08 Page: 139 Parcel# 10 1 12 0 001 011.037 Shelby County, Alabama

17. MISCELLANEOUS: