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CC FINANCING STATEMENT AND OLLOW INSTRUCTIONS						
. NAME & PHONE OF CONTACT AT FILER (optional))		1			
. NAME & FROME OF CONTACT ATTREET (Optional)	,					
. E-MAIL CONTACT AT FILER (optional)						
		•				
. SEND ACKNOWLEDGMENT TO: (Name and Addr	ess)		K	Return to: arley Wilson		
Record & Return to:			First National Fi	•	Services, LLC	•
Riverside Abstract LLC			3301 Windy F	•		
1 Paragon Drive, Suite 157				nta, GA 3033 348- AL2523 0		,
Montvale, NJ 07645	•		770-310-4.	J40- ALL43431	JOUSIA	
					R FILING OFFICE USE C	
INITIAL FINANCING STATEMENT FILE NUMBER 0170407000119240, filed 04/07/2017			(or recorded) in the	SINEAL FOLVIE I		
TERMINATION: Effectiveness of the Financing State	amont identified above	ie terminated v			n UCC3Ad) <u>and</u> provide Debtor	
Statement	silletti idettitilled above	12 fettimated A	in respect to the security	iliterest(s) or sec	ureu Party authorizing this	I C IIIIIII alloii
ASSIGNMENT (full or partial): Provide name of Assi For partial assignment, complete items 7 and 9 <u>and</u> als				name of Assignor	in item 9	
CONTINUATION: Effectiveness of the Financing St	atement identified abo	ve with respect	to the security interest(s)	of Secured Party	authorizing this Continuatio	n Statement
continued for the additional period provided by applica						
PARTY INFORMATION CHANGE:						
Check one of these two boxes:	<u>AND</u> Check <u>one</u> d —, CHANG	E name and/or a	ddress: CompleteA	DD name: Comple	te itemDELETE name: <	Give record na
This Change affects Debtor or Secured Party of reco	ord item 6a	or 6b; <u>and</u> item 7	a or 7b <u>and</u> item 7c7	a or 7b, <u>and</u> item 7d	to be deleted in it	em 6a or 6b
CURRENT RECORD INFORMATION: Complete for P 6a. ORGANIZATION'S NAME	arty Information Change	- provide only	one name (6a or 6b)			
6b. INDIVIDUAL'S SURNAME	1	FIRST PERSON	IAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for As Ta. ORGANIZATION'S NAME	ssignment or Party Information	Change - provide	only <u>one</u> name (7a or 7b) (use exa	ict, full name; do not on	nit, modify, or abbreviate any part of	the Debtor's nar
7a. ORGANIZATION S NAME						
7b. INDIVIDUAL'S SURNAME					<u> </u>	· ·
INDIVIDUAL'S FIRST PERSONAL NAME				•		
						LOUEEIV
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
MAILING ADDRESS		CITY	<u> </u>	STATE	POSTAL CODE	COUNTRY
COLLATERAL CHANGE: Also check one of these for	our boxes: ADD	collateral	DELETE collateral	RESTATE C	overed collateral A	SSIGN collat
Indicate collateral:						
	•		-		•	
			•			
			•			
				ορ Oh \ /		-41
NAME OF SECURED PARTY OF RECORD AUTI				or 9b) (name of As	signor, if this is an Assignme	nt)
If this is an Amendment authorized by a DEBTOR, check he ga. ORGANIZATION'S NAME	ere and provide na	me of authorizi	ng Debtor			
9a. ORGANIZATION'S NAME U.S. Bank National Association, as Trustee for the Pass-Through Certificates. Series 2017-K66	ere and provide na	me of authorizing	ng Debtor America Merrill Lynch	Commercial Mo	rtgage Inc., Multifamily I	Mortgage
If this is an Amendment authorized by a DEBTOR, check he 9a. ORGANIZATION'S NAME U.S. Bank National Association, as Trustee for the	ere and provide na	me of authorizi	ng Debtor America Merrill Lynch	Commercial Mo		

International Association of Commercial Administrators (IACA)

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 04/20/11)

12a U.\$	ME OF PARTY AUTHORIZING THIS AMENDMEN ORGANIZATION'S NAME	T: Same as item 9 on Amend			
U.\$			lment form		
			-		
Me	5. Bank National Association, as Trustee for the				
	rrill Lynch Commercial Mortgage Inc., Multifami ries 2017-K66	ly Mortgage Pass-Throug	h Certificates,		
	INDIVIDUAL'S SURNAME				
	FIRST PERSONAL NAME				
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX		•
				THE ABOVE SPACE IS FOR FILING OFFICE (JSE ONLY
	ne of DEBTOR on related financing statement (Na Debtor name (13a or 13b) (use exact, full name; do not o		•	ng purposes only in some filing offices - see Instruction item name); see Instructions if name does not fit	13): Provide
13a	. ORGANIZATION'S NAME				
	adison BAL LLC				
OR 13b	. INDIVIDUAL'S SURNAME	FIRST	PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
				· · · · · · · · · · · · · · · · · · ·	
14. ADE	DITIONAL SPACE FOR ITEM 8 (Collateral):				

15. This FINANCING STATEMENT AMENDMENT:	17. Description of real estate:
covers timber to be cut covers as-extracted collateral is filed as a fixture filing	
16. Name and address of a RECORD OWNER of real estate described in item 17	
(if Debtor does not have a record interest):	
Filed and Recorded	
Official Public Records	
Judge of Probate, Shelby County Alabama, C	punty
Clerk	
Shelby County, AL	
\J\] 06/29/2023 10:52:26 AM	
\$.00 BRITTANI	
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18. MISCELLANEOUS: