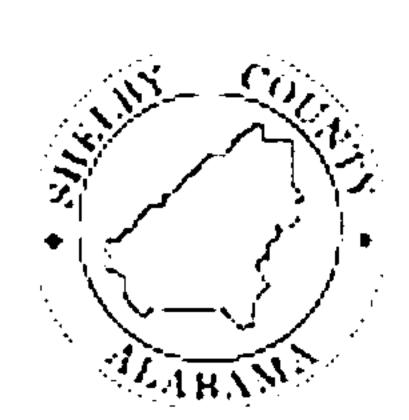
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## **UCC FINANCING STATEMENT**

FOLLOWINSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional)					
B. E-MAIL CONTACT AT FILER (optional)					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
Trustmark National Bank					
Attn: Loan Operations	Į.				
P.O. Box 1182					
Jackson, MS 39205					
		THE ABOVE S	PACE IS FO	OR FILING OFFICE USE	ONLY
1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b)	(use exact, full name; do not omit				
name will not fit in line 1b, leave all of item 1 blank, check here	and provide the Individual Debto	r information in item 10 of the	Financing St	atement Addendum (Form U	CC1Ad)
1a. ORGANIZATION'S NAME		·· <del>·</del> ··- ··- ··- ··- ··-			
CMACK Investments, LLC					
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX		SUFFIX
				· · · · · · · · · · · · · · · · · · ·	
1c. MAILING ADDRESS	CITY	<u> </u>	OTATE	POSTAL CODE	COUNTRY
414 Laurel Woods Trace	Helena		l _ i	35080	USA
		······································			
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (					
name will not fit in line 2b, leave all of item 2 blank, check here	and provide the Individual Debto	r information in item 10 of the	e Financing St	atement Addendum (Form U	CC1Ad)
2a. ORGANIZATION'S NAME				· · · - ·	
OR					
2b. INDIVIDUAL'S SURNAME	FIRST PERSONA	LNAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
					USA
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGN	SIGNOR SECURED DARTAY Dray	ride cally one Cooured Dady r			
3a. ORGANIZATION'S NAME	SIGNOR SECORED PARTY). PIO	vide only one Secured Party r	iame (sa or si	<u> </u>	<del></del>
Trustmark National Bank					
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONA	I NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
			1,00,110	MARE MANUE (O)/MAIT HAE (O)	30111
3c. MAILING ADDRESS	CITY	<del></del>	CTATE	IDOSTAL CODE	COUNTRY
2330 University Blvd	Tuscaloo	20	STATE	POSTAL CODE	COUNTRY
MOSU CHIVEISILY DIVU	1 uscatoo	sa	AL	35401	USA
4. COLLATERAL: This financing statement covers the following col		<del></del>			

All of the Debtors right, title and interest in and to all leases presently existing affecting all or a portion of the real property situated at 281 Old Cahaba Trail Helena, AL 35080; together with all future leases, subleases, licenses, guaranties and any other written or verbal agreements for the use and occupancy of the property including any extensions, renewals, modifications or replacements, and rents, issues and profits.



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
08/23/2023 10:52:24 AM
\$39.00 JOANN
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5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions)	being administered by a Decedent's Personal Representative
6a. Check only if applicable and check only one box:	6b. Check only if applicable and check only one box:
Public-Finance Transaction Manufactured-Home Transaction A Debtor is a Transmitting Utility	Agricultural Lien Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable):	Buyer Bailee/Bailor Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA: Secretary of State of Alabama	