C FINANCING STATEMENT LOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional) Rosemary A. Gilmore - (205) 874-7950				
LOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional)				
LOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional)				
NAME & PHONE OF CONTACT AT FILER (optional)				
· · ·				
v / / / / / / / / / / / / / / / / / / /				
-MAIL CONTACT AT FILER (optional)				
rgilmore@gattorney.com				
SEND ACKNOWLEDGMENT TO: (Name and Address)				
Rosemary A. Gilmore				
Gordon, Dana & Gilmore, LLC				
600 University Park Place, Ste 100				
Birmingham, AL 35209				
				
FRTOR'S NAME: Provide only one Debter name (1e or 1h) (use		of the second se	R FILING OFFICE USE	
EBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use ame will not fit in line 1b, leave all of item 1 blank, check here 🦳 ar	nd provide the Individual Debtor information in ite			
1a. ORGANIZATION'S NAME			<u> </u>	
Strategic Realty Partners, LLC				
1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
AAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3120 Sydenton Drive	Hoover	$ \mathbf{AL} $	35244	USA
EBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use	exact, full name; do not omit, modify, or abbrevi	iate any part of the Debtor	's name); if any part of the In	dividual Debt
ame will not fit in line 2b, leave all of item 2 blank, check here 🔲 ar	nd provide the Individual Debtor information in ite	em 10 of the Financing St	atement Addendum (Form U	
				CC1Ad)
2a. ORGANIZATION'S NAME			· · · · · · · · · · · · · · · · · · ·	CC1Ad)
				CC1Ad)
2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	CC1Ad)
2b. INDIVIDUAL'S SURNAME				SUFFIX
	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S) POSTAL CODE	
2b. INDIVIDUAL'S SURNAME MAILING ADDRESS	CITY	STATE	POSTAL CODE	SUFFIX
2b. INDIVIDUAL'S SURNAME MAILING ADDRESS ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN	CITY	STATE	POSTAL CODE	SUFFIX
2b. INDIVIDUAL'S SURNAME MAILING ADDRESS ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN 3a. ORGANIZATION'S NAME	CITY	STATE	POSTAL CODE	SUFFIX
2b. INDIVIDUAL'S SURNAME MAILING ADDRESS ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN	CITY	STATE ured Party name (3a or 3b	POSTAL CODE	SUFFIX
2b. INDIVIDUAL'S SURNAME MAILING ADDRESS ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN 3a. ORGANIZATION'S NAME Millennial Bank	CITY NOR SECURED PARTY): Provide only <u>one</u> Secu	STATE ured Party name (3a or 3b	POSTAL CODE	SUFFIX
2b. INDIVIDUAL'S SURNAME MAILING ADDRESS ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN 3a. ORGANIZATION'S NAME Millennial Bank	CITY NOR SECURED PARTY): Provide only <u>one</u> Secu	STATE ured Party name (3a or 3b	POSTAL CODE	SUFFIX
AAILING ADDRESS ECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGN 3a. ORGANIZATION'S NAME Millennial Bank 3b. INDIVIDUAL'S SURNAME	CITY NOR SECURED PARTY): Provide only one Secured First Personal Name	state ured Party name (3a or 3b	POSTAL CODE NAL NAME(S)/INITIAL(S)	SUFFIX

All property now or hereafter affixed or attached or incorporated upon the property located at 160 Atchison Drive, Chelsea, AL 35043, including without limitation, all furnaces, heating equipment, air conditioners, fans, water heaters, pipes, ducts, wiring and electrical fixtures, conduits, plumbing, sinks, partitions, restroom fixtures, light fixtures, windows and window coverings, and floor, ceiling and wall coverings, and all replacements thereof and substitutions therefor, which, to the fullest extent permitted by law shall be deemed fixtures and a part of the real property.

This filing is additional collateral for an indebtedness secured by a mortgage recorded simultaneously herewith in the Probate Office of Shelby County, AL.

5. Check <u>only</u> if applicable and check <u>o</u>	nly one box: Collateral is held in a Trus	t (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



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
08/25/2023 03:19:07 PM
\$39.00 JOANN
20230825000256870

alling 5. Buyl

UCC FINANCING STATEMENT ADDENDUM

Statement; if line 1b was left blank					
SUFFIX	THE ABOVE SPACE	IS FOR FILING OFFICE	NISE ONLY		
tor name or Debtor name that did not fit in enter the mailing address in line 10c					
			·		
		<u> </u>			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	· · · · · · · · · · · · · · · · · · ·		SUFFIX		
CITY	STATE	POSTAL CODE	COUNTRY		
ASSIGNOR SECURED PARTY'S	S NAME: Provide only <u>one</u> n	ame (11a or 11b)	· · · · · · · · · · · · · · · · · · ·		
FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX		
CITY	STATE	POSTAL CODE	COUNTRY		
·	r 1	collateral 🔽 is filed as a	fixture filing		
tem 16 16. Description of real estate:	L				
Lot B, Atchison's F	Lot B, Atchison's Resurvey No. 4, as recorded in Map Book 58, Page 41, in the Probate Office of Shelby Couty, Alabama.				
	CITY ASSIGNOR SECURED PARTY'S FIRST PERSONAL NAME CITY CITY Lot B-1, Atchison's F Lot B, Atchison's F	SUFFIX THE ABOVE SPACE tor name or Debtor name that did not fit in line 1b or 2b of the Financing senter the mailing address in line 10c STATE ASSIGNOR SECURED PARTY'S NAME: Provide only one not provide one	THE ABOVE SPACE IS FOR FILING OFFICE tor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UcC1) (usc enter the mailing address in line 10c CITY STATE POSTAL CODE ASSIGNOR SECURED PARTY'S NAME: Provide only and name (11a or 11b) FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) CITY STATE POSTAL CODE 3dol) In the 14. This FINANCING STATEMENT: COVERS timber to be cut Covers as-extracted collateral Postal Code tem 16 16. Description of real estate: Lot B-1, Atchison's Resurvey No. 5, being a resurvey of L Lot B, Atchison's Resurvey No. 4, as recorded in Map Bo		