

## UCC FINANCING STATEMENT AMENDMENT

| FOLLOW INSTRUCTIONS   |                                       |   |   |   |                             |
|---|---------------------------------------|---|---|---|-----------------------------|
| A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294   |                                       |   |   |   |                             |
| B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com   |                                       |   |   |   |                             |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)   |                                       |   |   |   |                             |
| 2643 36650  |                                       |   |   |   |                             |
| CSC<br>801 Adlai Stevenson Drive  |                                       |   |   |   |                             |
| Springfield, IL 62703   | Filed In: Alabama<br>(Shelby)         |   |   |   |                             |
| SEE BELOW FOR SECURED PARTY CONTACT INFO  | PRMATION                              | THE ABOVE   | SPACE IS FO                             | R FILING OFFICE US                      | E ONLY                      |
| 1a. INITIAL FINANCING STATEMENT FILE NUMBER 20210922000461760 09/22/2021  |                                       | 1b. This FINANCING STA<br>(or recorded) in the R<br>(Form UCC3Ad) and |   |   | ecord]<br>endment Addendum  |
| 2. TERMINATION: Effectiveness of the Financing Statement identified at  | ove is terminated with res            | ,   | •                                       |   | nination Statement          |
|   |                                       |   |   |   |                             |
| 3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, <u>and</u> address For partial assignment, complete items 7 and 9; check ASSIGN Collatera |                                       |   |   |   |                             |
| 4. CONTINUATION: Effectiveness of the Financing Statement identified additional period provided by applicable law                                   | above with respect to the             | security interest(s) of Secured                                       | Party authorizing                       | this Continuation Stateme               | ent is continued for the    |
| 5. PARTY INFORMATION CHANGE:  |                                       |   |   |   |                             |
| Check <u>one</u> of these two boxes:  | heck <u>one</u> of these three bo     |   | D name: Comple                          | te item DELETE par                      | ne: Give record name        |
| This Change affects Debtor or Secured Party of record   | CHANGE name and/or a item of the item |   | D name: Completor 7b, <u>and</u> item 7 | to be deleted                           | in item 6a or 6b            |
| 6. CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAME   | Change - provide only <u>on</u>       | e name (6a or 6b)   |   |   |                             |
| OR  |                                       |   |   |   |                             |
| 66. INDIVIDUAL'S SURNAME  Shaw  | Jack                                  | IAL NAME  | Frede                                   | NAL NAME(S)/INITIAL(S)<br>: <b>rick</b> | SUFFIX                      |
| 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party I   |                                       | one name (7a or 7h) (use evact full i                                 |   |   | e Debtor's name)            |
| 7. OTTATOLD OTTADDLD IN OTTATA COMPLETE OF ASSIGNMENT ONLY I  | Thomation onlinge - provide only      | One Hame (ra or rb) (ase exact, fair                                  | Tarric, do not omit, mo                 | diff, or abbreviate any part of the     | C Debior 3 mame)            |
|   |                                       |   |   |   |                             |
| 7b. INDIVIDUAL'S SURNAME  |                                       |   |   |   |                             |
| INDIVIDUAL'S FIRST PERSONAL NAME  |                                       |   |   |   |                             |
|   |                                       |   |   |   |                             |
| INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)  |                                       |   |   |   | SUFFIX                      |
| 7c. MAILING ADDRESS   | CITY                                  |   | STATE                                   | POSTAL CODE                             | COUNTRY                     |
|   |                                       |   |   |   |                             |
| 8. COLLATERAL CHANGE: Check only one box:   | ADD collateral                        | DELETE collateral   | RESTATE co                              | overed collateral                       | ASSIGN* collateral          |
| Indicate collateral:  |                                       | only if the assignee's power to amend                                 |   |   | the collateral in Section 8 |
| All fixtures now or hereafter securely and/or permane   |                                       | , ,   |   | luding personal                         |                             |
| effects and household goods or appliances that are n  | iot considered lixt                   | ures under applicabl  | e iaw.                                  |   |                             |
| Indebtedness \$30,000   |                                       |   |   |   |                             |
|   |                                       |   |   |   |                             |
|   |                                       |   |   |   |                             |
| 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THE Interest of this is an Amendment authorized by a DEBTOR, check here and pro-                     |                                       |   | (name of Assigno                        | or, if this is an Assignment            | )                           |
| 9a. ORGANIZATION'S NAME Cross River Bank and its s  |                                       |   | te Servicin                             | g, LLC                                  |                             |
|   |                                       |   |   |   |                             |
| OR   95 INDIVIDUAL'S SURNAME  | FIRST DEDSON                          | ΙΔΙ ΝΔΜΕ  |   | VAL NAME(S\/INITIAL/S\                  | SUFFIX                      |
| 9b. INDIVIDUAL'S SURNAME  | FIRST PERSON                          | IAL NAME  | ADDITIO                                 | NAL NAME(S)/INITIAL(S)                  | SUFFIX                      |

| 1. INITIAL FINANCING STATEMENT FILE NUMBER: Same 20210922000461760 09/22/2021  | as item 1a on Amendment form   |  |              |
|--|--|--|--------------|
| 2. NAME OF PARTY AUTHORIZING THIS AMENDMENT: S   | same as item 9 on Amendment form                                       |  |              |
| 12a. ORGANIZATION'S NAME  Cross River Bank and its successors an   | nd assigns c/o Marlette  |  |              |
|  |  |  |              |
| Servicing, LLC   |  |  |              |
| 12b. INDIVIDUAL'S SURNAME  |  |  |              |
| FIRST PERSONAL NAME  |  |  |              |
|  |  |  |              |
| ADDITIONAL NAME(S)/INITIAL(S)  | SUFFIX   |  |              |
| 2. Name of DERTOR on related financing statement (Name a   |  | IE ABOVE SPACE IS FOR FILING OFFICE      |              |
| <ol> <li>Name of DEBTOR on related financing statement (Name o<br/>one Debtor name (13a or 13b) (use exact, full name; do not omit, remaining to the content of the content</li></ol> |  |  | Provide only |
| 13a. ORGANIZATION'S NAME   |  |  |              |
| R  |  |  |              |
| ` 13b. INDIVIDUAL'S SURNAME Shaw   | FIRST PERSONAL NAME  Jack  | ADDITIONAL NAME(S)/INITIAL(S)  Frederick | SUFFIX       |
| I. ADDITIONAL SPACE FOR (CHECK ONE BOX):   | ITEM 8 (Collateral) OR OTHER INF                                       | ORMATION (Please Describe)               |              |
| ack Frederick Shaw   |  |  |              |
| Jack Frederick Shaw<br>101 Firefly Holw<br>Chelsea, AL 35043   |  |  |              |
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| 101 Firefly Holw<br>Chelsea, AL 35043  |  |  |              |
| 101 Firefly Holw<br>Chelsea, AL 35043  |  |  |              |
| Holy Holw Chelsea, AL 35043 Shelby County  | 17. D  |  |              |
| 5. This FINANCING STATEMENT AMENDMENT:   | 17. Description of real of APN: 141120                                 | estate:<br>000019000                     |              |
| 5. This FINANCING STATEMENT AMENDMENT:    covers timber to be cut   covers as-extracted collateral   S. Name and address of a RECORD OWNER of real estate described  | is filed as a fixture filing d in item 17                              |  |              |
| 5. This FINANCING STATEMENT AMENDMENT:    covers timber to be cut   covers as-extracted collateral (if Debtor does not have a record interest):   cack Frederick Shaw  | is filed as a fixture filing d in item 17  Property Add                | ress:                                    |              |
| 5. This FINANCING STATEMENT AMENDMENT:    covers timber to be cut   covers as-extracted collateral for the collateral of           | is filed as a fixture filing d in item 17                              | ress:<br>olw                             |              |
| 5. This FINANCING STATEMENT AMENDMENT:    covers timber to be cut   covers as-extracted collateral  | is filed as a fixture filing d in item 17  Property Add 401 Firefly Ho | ress:<br>olw<br>35043                    |              |
| Shelby County  5. This FINANCING STATEMENT AMENDMENT:    covers timber to be cut   covers as-extracted collateral   covers and address of a RECORD OWNER of real estate described   covers as-extracted collateral   covers as-extracted   covers as-extracte           | Property Add 401 Firefly Ho Chelsea, AL                                | ress:<br>olw<br>35043<br>ty              |              |

18. MISCELLANEOUS:

## **EXHIBIT A**

The West half of Southwest Quarter of Southwest Quarter and the North half of Northeast Quarter of Southwest Quarter Southwest Quarter of Section 12, Township 20 South, Range 2 West, Shelby County Alabama.

Also a proposed twenty foot (20 foot) wide easement described as follows: Commence at the Southeast corner of the Northeast Quarter of the Southwest Quarter of Section 12, township 20 south. Range 2 West, Shelby County, Alabama and run thence Westerly Along The South Line of said Quarter Quarter section a distance of 182.55 feet to a Point On The Westerly Right Of Way Line of a Paved Shelby County public road and the point of beginning of the easement being described; thence continue along last described course a distance of 1,159.53 feet to a point twenty feet (20 feet) west of the southwest corner of the northeast Quarter of the southwest Quarter of said Section 12 and on the south line of the Northwest Quarter of the Southwest Quarter of same said Section 12; thence turn a deflection angle of 90 degrees 00 minutes 00 section Right And Run Northerly A Distance of 20.0 feet to a point; thence turn a deflection angle of 90 degrees 00 minutes 00 seconds right and run easterly parallel with the said South Line of Said Northwest Quarter of The Southwest Quarter And The Northeast Quarter of the Southwest Quarter of said Section 12 a Distance of 1,140.54 feet to a point on the same said westerly right of way line of same said Shelby County public road; thence turn a deflection / angle a distance of 46 degrees 28 minutes 31 seconds right and run southeasterly along said right of way line of said public road a distance of 27.58 feet to the point of beginning; being situated in Shelby County, Alabama.

File: 2020356



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
09/11/2023 09:17:09 AM
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