20231003000294960 10/03/2023 08:54:26 AM UCC6 1/2

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)				
2661 84825 CSC				
801 Adlai Stevenson Drive	Filed In: Alabama			
Springfield, IL 62703	(Shelby)			
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION		THE ABOVE SPA	CE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Filer: attach Amendment Addendum			
20210413000182910 04/13/2021		(Form UCC3Ad) <u>and</u> provide		
2. TERMINATION: Effectiveness of the Financing Statement identified	d above is terminated with resp	ect to the security interest(s) of Sec	ured Part(y)(ies) authorizing this Termi	nation Statement
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and action for partial assignment, complete items 7 and 9; check ASSIGN Collaboration.	-	_		
4. CONTINUATION: Effectiveness of the Financing Statement identification additional period provided by applicable law	fied above with respect to the s	security interest(s) of Secured Party	authorizing this Continuation Statemen	t is continued for the
5. PARTY INFORMATION CHANGE:				
	Check one of these three bo	xes to:		
This Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; <u>and</u> item 3	address: Complete ADD nam 7a or 7b and item 7c 7a or 7b,	e: Complete item DELETE name and item 7c to be deleted in	e: Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Information				
6a. ORGANIZATION'S NAME				
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AT NIAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
LAWRENCE	JANE	AL NAIVIE	B	JOFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Pa		one name (7a or 7h) (use evact, full name; de		Jehtor's name)
7. OTIANOLD OTTADDLD IN OTTAINATION. Complete to Assignment of the	arty inflormation Griange - provide only	one hame (ra or rb) (use exact, full hame, ut	Thot offit, mounty, or appreviate any part of the i	
OR 7b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
T 14411 IN 10 4 D D D D D D	l outro		TOTATE IDOOTAL CODE	0.011117017
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Check only one box:	ADD collateral	DELETE collateral R	ESTATE covered collateral	ASSIGN* collateral
Indicate collateral:	*Check ASSIGN COLLATERAL o	nly if the assignee's power to amend the reco	ord is limited to certain collateral and describe the	e collateral in Section 8
	TI UO ARAENIDRAENIT. D			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and			of Assignor, if this is an Assignment)	
9a. ORGANIZATION'S NAME Foundation Finance Cor	·			
	,, <u> </u>			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA::15971811 / 600	089154			2661 8482

FOLLOW INSTRUCTIONS	AMENDMENI ADI	JENDUN		
11. INITIAL FINANCING STATEMENT FILE NUMBE 20210413000182910 04/13/2021	R: Same as item 1a on Amendment for	m		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form				
12a. ORGANIZATION'S NAME Foundation Finance Company LL	.C			
OR 12b. INDIVIDUAL'S SURNAME				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE U	JSE ONLY
one Debtor name (13a or 13b) (use exact, full name; do 13a. ORGANIZATION'S NAME OR 13b. INDIVIDUAL'S SURNAME	not omit, modify, or abbreviate any part	RSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
LAWRENCE	JANE		В	
	Filed and Recorded Official Public Records Judge of Probate, Shelby Cor Clerk Shelby County, AL	unty Alabama, (County	
	Shelby County, AL 10/03/2023 08:54:26 AM \$.00 CHARITY			

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15. This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted collateral is filled as a fixture filling. 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): JANE B LAWRENCE 100 Wild Flower Trail Alabaster, AL 35007	17. Description of real estate: SUB: THE MEADOWS PLAT 1 AMENDE D MAP MB/MP:19/010 LOT/BLOCK:30/000 County: SHELBY, AL APN:23-5-15-0-003-030-000 Census Tract/Block: 306.042 Township-Range-Sect:21-3W-15 Subdivision: THE MEADOWS 1 AMD MAP Legal Book/Page:19-010 Legal Lot:30 Neighbor Code:CR6 Munic/Township: ALABASTER
18. MISCELLANEOUS:	