20231229000372280 12/29/2023 09:16:40 AM UCCCONT 1/1

LICC 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)					
2722 60125 CSC					
801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Alabama (Shelby)				
SEE BELOW FOR SECURED PARTY CONTACT INFO	THE ABOVE	SPACE IS FO	R FILING OFFICE L	JSE ONLY	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20190606000197380 06/06/2019	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13.				
2. TERMINATION: Effectiveness of the Financing Statement identified a	bove is terminated with resp	ect to the security interest(s)	of Secured Part(y)(ies) authorizing this Te	ermination Statement
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and address For partial assignment, complete items 7 and 9; check ASSIGN Collatera	-	<u> </u>			
4. CONTINUATION: Effectiveness of the Financing Statement identified additional period provided by applicable law	above with respect to the s	ecurity interest(s) of Secured	Party authorizing	this Continuation State	ment is continued for the
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes:	CHANCE name and/or of		D name: Comple	to itom DELETE -	amas. Chia raaard mana
This Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; <u>and</u> item 7		D name: Completor 7b, <u>and</u> item 7	to be delete	ame: Give record name ed in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information 6a. ORGANIZATION'S NAME Greystone Petro, L.L.C.	n Change - provide only <u>one</u>	name (6a or 6b)			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party	Information Change provide only	one name (7a or 7h) (use eyest full i	nama: da nat amit, ma	difu or abbroxista any nart of	the Debter's name
7. OF IXIOOLD OF ADDLD IN ORWANION. Complete to Assignment of Fally 7a. ORGANIZATION'S NAME	Infolitiation Change - provide only	one name (ra or rb) (use exact, ium	mame, do not omit, me	dily, or abbreviate arry part or	ine Debior 3 manne)
OR					
7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUALO I INCOTT LINGUINALINAIVIL					
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	USA
8. COLLATERAL CHANGE: Check only one box:	ADD collateral	DELETE collateral	RESTATE co	overed collateral	ASSIGN* collateral
Indicate collateral:	*Check ASSIGN COLLATERAL o	nly if the assignee's power to amend	the record is limited to	certain collateral and describ	oe the collateral in Section 8
	Official Pul	olic Records			
	Judge of Pr Clerk	obate, Shelby County Al	abama, Count	y	
	Shelby Cou 12/29/2023	nty, AL 09:16:40 AM			
TABANI A	\$39.00 JOA 2023122900	NN	Q.	lei 5. Beyl	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING TO	HIS AMENDMENT: Prov	ride only <u>one</u> name (9a or 9b)	(name of Assigno	or, if this is an Assignme	nt)
If this is an Amendment authorized by a DEBTOR, check here and pro	ovide name of authorizing De	ebtor			
	FIDAT BESSON	A L BLABAT	LABBITIO	TAL KIAKATZONALITZALZ	e) Tourenz
9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Hueycarr 600035	5300				2722 6012