

UCC FINANCING STATEMENT AMENDMEI FOLLOW INSTRUCTIONS	NT			
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) Jocelyn Hoyt 404-591-4298				
B. E-MAIL CONTACT AT SUBMITTER (optional)				
jhoyt@coastalstatesbank.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address)				
Coastal States Bank 4819 Emperor Blvd. Ste 330				
Durham, NC 27703				
SEE BELOW FOR SECURED PARTY CONTACT INFORMA	ATION	THE ABOVE SPA	CE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20190410000117900			ENT AMENDMENT is to be filed [for red STATE RECORDS. Filer: <u>attach</u> Amend	ord] dment Addendum
2. TERMINATION: Effectiveness of the Financing Statement identified above is	s terminated with resp	(Form UCC3Ad) <u>and</u> provided ect to the security interest(s) of Sec		nation Statement
	•	, ,		
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, <u>and</u> address of Assignee in item 7a or 7b, <u>and</u> address of Assignment, complete items 7 and 9; check ASSIGN Collateral box it				
4. CONTINUATION: Effectiveness of the Financing Statement identified above additional period provided by applicable law	e with respect to the s	ecurity interest(s) of Secured Party	authorizing this Continuation Statemen	t is continued for the
5. PARTY INFORMATION CHANGE:				
Check one of these two boxes.	one of these three box ANGE name and/or a		e: Complete item ——DELETE name	. Give record name
This Change affects Debtor <u>or</u> Secured Party of record item	n 6a or 6b; <u>and</u> item 7		ne: Complete itemDELETE name to be deleted in	item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Chan 6a. ORGANIZATION'S NAME	ige - provide only <u>one</u>	name (ba or bb)		
Folsom Metal Products, Inc.				
6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7 CHANCED OD ADDED INEODMATIONI. Complete for Accimum and an Dente Informaci	in Ohaman and de ander	(7 71-) (+ flll	1 1 1 1	3 -1-4'
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informational Transport of the Party Information of the	ion Change - provide only	one name (7a or 7b) (use exact, tuli name; d	o not omit, modity, or appreviate any part of the L	Jebior's name)
OR 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:	DD collateral	DELETE collateral	RESTATE covered collateral	ASSIGN* collateral
<u></u>	Ľ		ord is limited to certain collateral and describe the	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A	MENDMENT: Prov	ide only one name (9a or 9b) (name	of Assignor, if this is an Assignment)	
If this is an Amendment authorized by a DEBTOR, check here and provide na				
9a. ORGANIZATION'S NAME Coastal States Bank as Successfor by A	cauisition v	with Cornerstone F	Rank	
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:	•			•

LICC EINIANCING STATEMENT AMENDMENT ADDENDIM

LOW INSTRUCTIONS INITIAL FINANCING STATEMENT FILE NUMBER:	Same as item 1a on Amendment form			
0190410000117900				
NAME OF PARTY AUTHORIZING THIS AMENDMENT 12a. ORGANIZATION'S NAME Training Training This amendment Training Training This amendment Training Training This amendment Training Trai	NT. Same as item 9 on Amendment form			
Folsom Metal Products, Inc.				
12b. INDIVIDUAL'S SURNAME				
FIDOT DEDOONAL NIANE				
FIRST PERSONAL NAME				
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		VE SPACE IS FOR FILING OFFICE U	ISE ONI V
Name of DEBTOR on related financing statement (N		dexing purposes only in so	me filing offices - see Instruction item 13): F	
one Debtor name (13a or 13b) (use exact, full name; do not 13a. ORGANIZATION'S NAME	omit, modify, or abbreviate any part of the Debto	r's name); see Instructions	if name does not fit	
				<u> </u>
13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL N	AME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
	Filed and Reco Official Public			
	Official Public Judge of Proba	Records	Alabama, County	
	Official Public Judge of Proba Clerk Shelby County	Records te, Shelby County AL	Alabama, County	
	Official Public Judge of Proba Clerk	Records te, Shelby County AL		
	Official Public Judge of Proba Clerk Shelby County, 01/23/2024 11:0	Records te, Shelby County AL 2:26 AM	Alabama, County	Beyol
This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted coll	Official Public Judge of Proba Clerk Shelby County, 01/23/2024 11:0 \$.00 JOANN 2024012300001	Records te, Shelby County AL 2:26 AM	ale: 5.	Beyl
This FINANCING STATEMENT AMENDMENT:	Official Public Judge of Proba Clerk Shelby County, 01/23/2024 11:0 \$.00 JOANN 2024012300001	Records te, Shelby County AL 2:26 AM 7190 escription of real estate:	ale: 5.	Beyol
This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted coll Name and address of a RECORD OWNER of real estate des	Official Public Judge of Proba Clerk Shelby County, 01/23/2024 11:0 \$.00 JOANN 2024012300001	Records te, Shelby County AL 2:26 AM 7190 escription of real estate:	ale: 5.	Beyol
This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted coll Name and address of a RECORD OWNER of real estate des	Official Public Judge of Proba Clerk Shelby County, 01/23/2024 11:0 \$.00 JOANN 2024012300001	Records te, Shelby County AL 2:26 AM 7190 escription of real estate:	ale: 5.	Beyol
This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted coll Name and address of a RECORD OWNER of real estate des	Official Public Judge of Proba Clerk Shelby County, 01/23/2024 11:0 \$.00 JOANN 2024012300001	Records te, Shelby County AL 2:26 AM 7190 escription of real estate:	ale: 5.	Beyl
This FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted coll Name and address of a RECORD OWNER of real estate des	Official Public Judge of Proba Clerk Shelby County, 01/23/2024 11:0 \$.00 JOANN 2024012300001	Records te, Shelby County AL 2:26 AM 7190 escription of real estate:	ale: 5.	Buch

18. MISCELLANEOUS: