AL9244	454				
UCC FINANCING STATEMENT AMEI FOLLOWINSTRUCTIONS Parcel ID: 13 8 34 1 00					
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional CSC 1-800-858-5294	ıl)				
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
2738 51570 CSC 801 Adlai Stevenson Drive					
Springfield, IL 62703	Filed In: Alabama (Shelby)				
SEE BELOW FOR SECURED PARTY CONTAC	T INFORMATION	THE ABOVE SP	ACE IS FO	R FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20230613000176730 06/13/2023		b. This FINANCING STATEN (or recorded) in the REAL (Form UCC3Ad) <u>and</u> prov			rd] ment Addendum
2. TERMINATION: Effectiveness of the Financing Statement idea	ntified above is terminated with resp	ect to the security interest(s) of Se	ecured Part(y	()(ies) authorizing this Termina	ation Statement
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, <u>a</u> For partial assignment, complete items 7 and 9; check ASSIGN 6	ind address of Assignee in item 7c <u>a</u> Collateral box in Item 8 and describe	nd name of Assignor in item 9 the affected collateral in item 8			
4. CONTINUATION: Effectiveness of the Financing Statement is additional period provided by applicable law	dentified above with respect to the s	ecurity interest(s) of Secured Part	y authorizing	this Continuation Statement	is continued for the
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes.	AND Check <u>one</u> of these three box  CHANGE name and/or a  item 6a or 6b; <u>and</u> item 7		ıme: Comple	ete item DELETE name:	Give record name
This Change affects Debtor or Secured Party of record  6. CURRENT RECORD INFORMATION: Complete for Party Inf			o, <u>and</u> item 7	c to be deleted in	item 6a or 6b
6a. ORGANIZATION'S NAME					
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON.	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
SMITH	CHARLES	3			
7. CHANGED OR ADDED INFORMATION: Complete for Assignment 7a. ORGANIZATION'S NAME	t or Party Information Change - provide only	one name (7a or 7b) (use exact, full name;	do not omit, mo	odify, or abbreviate any part of the De	ebtor'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:	ADD collateral	DELETE collateral	RESTATE c	overed collateral	ASSIGN* collateral
Indicate collateral:	<u> </u>	nly if the assignee's power to amend the re			
See Exhibit A					
The Indebtedness Amount is \$20900					
A NAME OF SECURED PARTY OF RECORD ALITHORIZ	ZING THIS AMENIDMENT: Prov	ida anly ana nama (On ar Oh) (nar	an of Accions	or if this is an Assignment)	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZ  If this is an Amendment authorized by a DEBTOR, check here	and provide name of authorizing De		ne oi Assigni	or, ir unis is an Assignment)	
9a. ORGANIZATION'S NAME Advantage Experts S	ervices				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON.	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:					
10. OF TIONAL FILLIN INC. ENLINGE DATA.					2738 5157

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 07/01/23)

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 20230613000176730 06/13/2023						
12	NAME OF PARTY AUTHORIZING THIS AMENDMENT:					
	12a. ORGANIZATION'S NAME					
	Advantage Experts Services					
OR	12b. INDIVIDUAL'S SURNAME					
	120. INDIVIDOAL O GOINNAIVIL					
	FIRST PERSONAL NAME					
	A DIDITION ALL NIARATION (INSTITUTE)		Louising			
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX			
				THE ABOVE	SPACE IS FOR FILING OFFICE	USE ONLY
13	Name of DEBTOR on related financing statement (Name	of a current Debtor of record requ	ired for indexing i	nurnoses only in some	filing offices - see Instruction item 13):	Provide only
	one Debtor name (13a or 13b) (use exact, full name; do not omit	-				FIOVICE OILLY
		i, mount, or abbiotiate any part of	THE BODIES O HAM			
	13a. ORGANIZATION'S NAME					
OR	13b. INDIVIDUAL'S SURNAME	TEIRST PERS	SONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
					ADDITIONAL NAME(O)/INTTIAL(O)	1001117
	SMITH	CHARI	LE9			
14	ADDITIONAL SPACE FOR (CHECK ONE BOX):	ITEM 8 (Collateral) OF	R DOTI	HER INFORMATIO	۱ (Please Describe)	<b>.</b>
			` <b>L</b>		(	
16. CH 80	This FINANCING STATEMENT AMENDMENT:  covers timber to be cut covers as-extracted collater.  Name and address of a RECORD OWNER of real estate describe (if Debtor does not have a record interest):  HARLES SMITH  INDEPENDENCE DR ABASTER, AL 35007	· ·	SITUAT SHELB DESIGI SUBDI	TE IN THE CITY, STATE OF NATED AS LOVISION.	CE OR PARCEL OF LATY OF ALABAMA, BEING KNOT 33, VALLEY FORGE	OUNTY OF IOWN AND
18.	MISCELLANEOUS:					

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT ADDENDUM (Form UCC3Ad) (Rev. 07/01/23)

## **EXHIBIT "A"**

The following described property as set forth in that certain HVAC RENTAL AGREEMENT dated 5/8/2023, by and between Service Experts Heating & Air Conditioning LLC and the Debtor: A LENNOX heating component, Model #EL18XPV-048-230A01 (Serial # 5822M07008) and a LENNOX air conditioner, Model #CBA38MV-048-230-6-02 (Serial # 1622E23637), whether now owned or hereafter acquired, together with all replacements thereof, all attachments, accessories, parts and tools belonging thereto or for use in connection therewith; and any and all products and proceeds of any of the foregoing (including, but not limited to, any claims to any items referred to in this definition, and any claims of Debtor against third parties for loss of, damage to or destruction of any or all of the collateral or for proceeds payable under, or unearned premiums with respect to, policies of insurance) in whatever form, including, but not limited to, all cash, interest, principal, royalties, license fees, rents, dividends, negotiable instruments and other instruments for the payment of money, chattel paper, security agreements and other documents or other property from time to time received, receivable or otherwise distributed in respect of, or in exchange for, the collateral. Said collateral is located at address:

808 INDEPENDENCE DR

ALABASTER, AL 35007

THIS FILING IS MADE FOR NOTICE PURPOSES ONLY. THE DEBTOR HAS NO OWNERSHIP RIGHTS IN THE COLLATERAL.

20240213000036470

THE DEBTOR IS LEASING THE COLLATERAL.



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
02/13/2024 12:30:37 PM
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