

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax	: 818-662-4141				
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 30877 - AM	IERIS BANK				
	0179				
P.O. Box 29071 Glendale, CA 91209-9071 ALAL					
FIXT	URE				
File with: Shelby, AL		THE ABOVE SPA	CE IS FO	R FILING OFFICE U	JSE ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20140806000243690 8/6/2014 CC AL Shelby		1b. This FINANCING STATE (or recorded) in the REAL Filer: attach Amendment Add	MENT AM LESTATE	ENDMENT is to be filed RECORDS	[for record]
TERMINATION: Effectiveness of the Financing Statement identified above Statement	e is terminated with		·		
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, For partial assignment, complete items 7 and 9 and also indicate affected		-	ssignor in	item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified about continued for the additional period provided by applicable law	ve with respect to the	ne security interest(s) of Secured	Party autl	norizing this Continuation	n Statement is
5. X PARTY INFORMATION CHANGE:					
Check one of these two boxes.	ne of these three box ANGE name and/or a	es to: ddress: Complete	ne: Compl <u>e</u>	te item DELETE nam	ne: Give record name
This Change affects Debtor or Secured Party of record item 6. CURRENT RECORD INFORMATION: Complete for Party Information Change		<u> </u>	and item 7	c to be deleted	in item 6a or 6b
6a. ORGANIZATION'S NAME FIDELITY BANK	provide orny <u>orie</u>	name (od or ob)			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONA	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information	Change - provide only <u>o</u>	ne name (7a or 7b) (use exact, full name;	do not omit,	nodify, or abbreviate any part of	f the Debtor's name)
7a. ORGANIZATION'S NAME AMERIS BANK					
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
3500 Piedmont Rd NE, Ste 500	Atlanta		GA	30305	USA
8. COLLATERAL CHANGE: Also check one of these four boxes: A	DD collateral	DELETE collateral	RESTATE	covered collateral	ASSIGN collatera
Indicate collateral:					
OFOURED DARTY - DECORDS					
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AI If this is an Amendment authorized by a DEBTOR, check here and provide 19a. ORGANIZATION'S NAME	e name of authorizin		ame of Ass	signor, if this is an Assign	ment)
FIDELITY BANK					
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSONA	L NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: 700 RIDGEV	IEW. LLC		<u> </u>		
97440179 338 ATL PIEDMONT RD NE	•			726648902-1 c126	5636

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

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11. INITIAL FINANCING STATEMENT FILE NUMBER: Sam 20140806000243690 8/6/2014 CC AL She		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT	: Same as item 9 on Amendment form	
12a. ORGANIZATION'S NAME FIDELITY BANK		
OR 12b. INDIVIDUAL'S SURNAME		
FIRST PERSONAL NAME		
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY
13. Name of DEBTOR on related financing statement (Namone Debtor name (13a or 13b) (use exact, full name; do	•	purposes only in some filing offices - see Instruction item 13): Provide only tor's name); see Instructions if name does not fit
13a. ORGANIZATION'S NAME 700 RIDGEVIEW, LLC		
OR 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

Debtor Name and Address:

700 RIDGEVIEW, LLC - 20 BUCKHEAD PLAZA, 3050 PEACHTREE ROAD, ATLANTA, GA 30305

Secured Party Name and Address:

AMERIS BANK - 3500 Piedmont Rd NE Ste 500, Atlanta, GA 30305



Filed and Recorded Official Public Records Judge of Probate, Shelby County Alabama, County Clerk **Shelby County, AL** 02/16/2024 12:22:37 PM **\$39.00 JOANN** 20240216000040970

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15. This FINANCING STATEMEN	NT AMENDMENT:		17. Description of real estate:		
covers timber to be cut	covers as-extracted collateral	is filed as a fixture filing	SEE ORIGINAL F	ILING	
16. Name and address of a RECO	ORD OWNER of real estate describe	ed in item 17			
(if Debtor does not have a rec	cord interest):				
40 MICOELL ANEOLIO, 07440470	AL 447 20077 AMEDIC DANIZ	CIDCLITY DANK	File with: Chalby Al	220 ATL DIEDMONT DD NE	700040000 4 -4005000

18. MISCELLANEOUS: 97440179-AL-117 30877 - AMERIS BANK

FIDELITY BANK

File with: Shelby, AL

338 ATE PIEDMONT RD NE /26648902-1 C1265636