20240221000044570 02/21/2024 08:14:15 AM UCC1 1/3

Fax: 818-662-4141			
Concord Servicing			
7490017 AL			
	THE ABOVE SPACE IS F	OR FILING OFFICE L	ISE ONLY
FIRST PERSONAL NAME	ADDITIO	DNAL NAME(S)/INITIAL(S)	SUFFIX
	07.475	DOOTAL CODE	COLINITEN
			COUNTRY
			USA Ladividual Dabter
FIRST PERSONAL NAME	ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)	
CITY	STATE	POSTAL CODE	COUNTRY
SECURED PARTY): Provide only on	ne Secured Party name (3a or	3b)	
National Association Della	e Donne Corporate Ce	enter	
FIRST PERSONAL NAME	ADDITI	ADDITIONAL NAME(S)/INITIAL(S)	
CITY	STATE	POSTAL CODE	COUNTRY
	FIRST PERSONAL NAME RICHARD  CITY  ALABASTER  act, full name; do not omit, modify, or rovide the Individual Debtor information  FIRST PERSONAL NAME  CITY  CITY  SECURED PARTY): Provide only on the Individual Association Della Control of the Individual Debtor Individual Debtor Information  CITY  SECURED PARTY): Provide only on the Individual Association Della Control of th	THE ABOVE SPACE IS F  Inct, full name; do not omit, modify, or abbreviate any part of the Debtrovide the Individual Debtor information in item 10 of the Financing S  FIRST PERSONAL NAME RICHARD CITY ALABASTER AL  Inct, full name; do not omit, modify, or abbreviate any part of the Debtrovide the Individual Debtor information in item 10 of the Financing S  FIRST PERSONAL NAME CITY ALABASTER AL  Inct, full name; do not omit, modify, or abbreviate any part of the Debtrovide the Individual Debtor information in item 10 of the Financing S  FIRST PERSONAL NAME ADDITION CITY STATE  SECURED PARTY): Provide only one Secured Party name (3a or secured Party name)  National Association Delle Donne Corporate Celebraters  National Association Delle Donne Corporate Celebraters	THE ABOVE SPACE IS FOR FILING OFFICE L  Cit, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form RICHARD T STATE POSTAL CODE ALABASTER AL 35007  City STATE POSTAL CODE ALABASTER AL 35007  Cit, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Povide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)  FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S)  CITY STATE POSTAL CODE  SECURED PARTY): Provide only one Secured Party name (3a or 3b)  National Association Delle Donne Corporate Center

Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$7,030.00 Mortgage tax due (\$.15 per \$100.00 or fraction thereof) \$10.65

5. Check only if applicable and check or	nly one box: Collateral is held in a Tru	ust (see UCC1Ad, item 17 and	d Instructions)	being administered by a Dec	edent's Personal Representative
6a. Check only if applicable and check	only one box:			6b. Check only if applicable	and check only one box:
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Transm	nitting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if ap	plicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DAT	ГА:				
97490017	Waterfall			RB24851	

## 

## **UCC FINANCING STATEMENT ADDENDUM**

FOL	INSTRI	JCTIONS.	

OLLOW INSTRUCTIONS				
NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Stateme	ent; if line 1b was left blank			
because Individual Debtor name did not fit, check here   9a. ORGANIZATION'S NAME				
9b. INDIVIDUAL'S SURNAME				
JOHNSON				
FIRST PERSONAL NAME				
RICHARD	I			
ADDITIONAL NAME(S)/INITIAL(S)  T	SUFFIX			
			IS FOR FILING OFF	
). DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor r		line 1b or 2b of the Financing S	tatement (Form UCC1) (us	se exact, full name;
do not omit, modify, or abbreviate any part of the Debtor's name) and ente 10a. ORGANIZATION'S NAME	er the mailing address in line 10c			
R 10b. INDIVIDUAL'S SURNAME				
INDIVIDUAL'S FIRST PERSONAL NAME				
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
Dc. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
	SIGNOR SECURED PARTY'S	NAME: Provide only <u>one</u> nam	e (11a or 11b)	
11a. ORGANIZATION'S NAME				
11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
TID. INDIVIDOALO CONNAIVIL	TITOTTEROONALNAME	ADDITIO		
1c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
2. ADDITIONAL SPACE FOR ITEM 4 (Collateral):				
K - A				
3. This FINANCING STATEMENT is to be filed [for record] (or recorde REAL ESTATE RECORDS (if applicable)	<u> </u>		K <b>Z</b>	
		cut covers as-extracted	collateral X is filed as	a fixture filing
. Name and address of a RECORD OWNER of real estate described in it (if Debtor does not have a record interest):	tem 16 16. Description of real estate	e:		
	Darcol Idontific	er: 13-8-27-4-002	117 000 1 00	ച
	Description: T	HE FOLLOWING	- DESCOIDED	aı DEAI
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		/EY OF AUTUM		•
		ED IN MAP BOOK	•	•
	•	IE PROBATE OF	-FICE OF SHI	ELBY
	[ See Exhibit for Rea	ai Estate j		
. MISCELLANEOUS: 97490017-AL-117 51860 - Concord Servicing Co	WF HIL 2021-1 Grantor Trust c/o U.S.	File with: Shelby, AL Waterfa	all RB24851	

Debtor: JOHNSON, RICHARD, T

Exhibit for Real Estate

16. Description of real estate: Continued

COUNTY, ALABAMA; BEING SITUATED IN SHELBY

COUNTY, ALABAMA.



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
02/21/2024 08:14:15 AM
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