



UCC 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) <div>2772 96436 CSC 801 Adlai Stevenson Drive Springfield, IL 62703</div> <div>Filed In: Alabama (Shelby)</div>																																																							
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION			THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY																																																				
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20200617000246120 06/17/2020			1b. <input checked="" type="checkbox"/> 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. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Part(y)(ies) authorizing this Termination Statement																																																							
3. <input type="checkbox"/> ASSIGNMENT: Provide name of Assignee in item 7a or 7b, <u>and</u> address of Assignee in item 7c <u>and</u> name of Assignor in item 9 For partial assignment, complete items 7 and 9; check ASSIGN Collateral box in Item 8 and describe the affected collateral in item 8																																																							
4. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law																																																							
5. PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes: <input type="checkbox"/> Debtor <u>or</u> <input type="checkbox"/> Secured Party of record <u>AND</u> Check <u>one</u> of these three boxes to: <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; <u>and</u> item 7a or 7b <u>and</u> item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, <u>and</u> item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b																																																							
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)																																																							
<table><tr><td rowspan="2">OR</td><td colspan="4">6a. ORGANIZATION'S NAME</td></tr><tr><td colspan="4"></td></tr><tr><td rowspan="2">OR</td><td colspan="2">6b. INDIVIDUAL'S SURNAME</td><td>FIRST PERSONAL NAME</td><td>ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr><tr><td colspan="2">STANDLEE</td><td>JEREMY</td><td></td><td></td></tr></table>					OR	6a. ORGANIZATION'S NAME								OR	6b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	STANDLEE		JEREMY																																	
OR	6a. ORGANIZATION'S NAME																																																						
OR	6b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX																																																		
	STANDLEE		JEREMY																																																				
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only <u>one</u> name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)																																																							
<table><tr><td rowspan="4">OR</td><td colspan="5">7a. ORGANIZATION'S NAME</td></tr><tr><td colspan="5"></td></tr><tr><td colspan="5">7b. INDIVIDUAL'S SURNAME</td></tr><tr><td colspan="5"></td></tr><tr><td colspan="5">INDIVIDUAL'S FIRST PERSONAL NAME</td></tr><tr><td colspan="5"></td></tr><tr><td colspan="5">INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)</td></tr><tr><td colspan="5"></td></tr><tr><td colspan="5">SUFFIX</td></tr><tr><td colspan="5"></td></tr></table>					OR	7a. ORGANIZATION'S NAME										7b. INDIVIDUAL'S SURNAME										INDIVIDUAL'S FIRST PERSONAL NAME										INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)										SUFFIX									
OR	7a. ORGANIZATION'S NAME																																																						
	7b. INDIVIDUAL'S SURNAME																																																						
INDIVIDUAL'S FIRST PERSONAL NAME																																																							
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)																																																							
SUFFIX																																																							
<table><tr><td>7c. MAILING ADDRESS</td><td>CITY</td><td>STATE</td><td>POSTAL CODE</td><td>COUNTRY</td></tr><tr><td></td><td></td><td></td><td></td><td></td></tr></table>					7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY																																														
7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY																																																			
8. COLLATERAL CHANGE: Check only <u>one</u> box: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN* collateral Indicate collateral: <u>SWIMMING POOL</u> *Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to certain collateral and describe the collateral in Section 8 TOTAL INDEBTEDNESS: \$0 TAX AMOUNT OF \$0 TO BE PAID BASED ON TOTAL INDEBTEDNESS AMOUNT OF \$0																																																							
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor																																																							
<table><tr><td rowspan="2">OR</td><td colspan="4">9a. ORGANIZATION'S NAME Aqua Finance, Inc.</td></tr><tr><td colspan="4"></td></tr><tr><td rowspan="2">OR</td><td colspan="2">9b. INDIVIDUAL'S SURNAME</td><td>FIRST PERSONAL NAME</td><td>ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr><tr><td colspan="2"></td><td></td><td></td><td></td></tr></table>					OR	9a. ORGANIZATION'S NAME Aqua Finance, Inc.								OR	9b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX																																				
OR	9a. ORGANIZATION'S NAME Aqua Finance, Inc.																																																						
OR	9b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX																																																		
10. OPTIONAL FILER REFERENCE DATA: :CX SX404935409																																																							
2772 96436																																																							

UCC FINANCING STATEMENT AMENDMENT ADDENDUM  
FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 20200617000246120 06/17/2020		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form		
OR	12a. ORGANIZATION'S NAME Aqua Finance, Inc.	
	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 (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit

OR	13a. ORGANIZATION'S NAME			
	13b. INDIVIDUAL'S SURNAME STANDLEE	FIRST PERSONAL NAME JEREMY	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

14. ADDITIONAL SPACE FOR (CHECK ONE BOX): ☒ ITEM 8 (Collateral) OR ☐ OTHER INFORMATION (Please Describe)



Filed and Recorded  
Official Public Records  
Judge of Probate, Shelby County Alabama, County  
Clerk  
Shelby County, AL  
03/04/2024 08:45:45 AM  
\$.00 MISTI  
20240304000057460

*Allie S. Bayl*

15. This FINANCING STATEMENT AMENDMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing	17. Description of real estate: 218 TIMBER RIDGE CIR ALABASTER, AL 35007-5028 County SHELBY COUNTY Parcel Number 237254002014000 Abbrev. Description SEC/TWNSHP/RAN 25 21S 03W NBRHD: 02 FOREST RIDGE R-2
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): JEREMY STANDLEE 218 TIMBER RIDGE CIR ALABASTER, AL 35007-5028	

18. MISCELLANEOUS: