20240411000103330 04/11/2024 08:06:11 AM UCC1 1/2

## LICC FINANCING STATEMENT

FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional)  JANET HOLLOWAY					
B. E-MAIL CONTACT AT FILER (optional)					
LOANS@SPIREENERGY.COM					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
SPIRE ALABAMA INC. 20 20TH STREET SOUTH					
BIRMINGHAM, AL 35233					
1. DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (u	ise exact, full name: do not omi:			R FILING OFFICE	
name will not fit in line 1b, leave all of item 1 blank, check here	and provide the Individual Deb				
1a. ORGANIZATION'S NAME					
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSON	ΔΙ ΝΔΜΕ	IADDITIO	NAL NAME(S)/INITIAL	(S) SUFFIX
SKATES	JENNIF				
1c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
101 MEADOW CROFT CIR	BIRMIN	IGHAM	AL	35242	US
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (under name will not fit in line 2b, leave all of item 2 blank, check here					
2a. ORGANIZATION'S NAME	and provide the individual Dec	nor information in item 10 0	i the Financing Su	Acement Addendum (F	JIII OCC IAG)
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIO	NAL NAME(S)/INITIAL	(S) SUFFIX
				T	
2c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASS	IGNOR SECURED PARTY): P	ovide only one Secured Pa	rty name (3e or 3h	<u> </u>	
3a. ORGANIZATION'S NAME	IONOR OLOGICLE I AIRTI J. 11	Ovide Citiy <u>One</u> Gecured i a	ity manne (Sa Or Sb	· ·	
SPIRE ALABAMA INC.					
3b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIO	NAL NAME(S)/INITIAL	(S) SUFFIX
3c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
20 20TH STREET SOUTH	BIRMIN	IGHAM	AL	35233	US
4. COLLATERAL: This financing statement covers the following colla	ateral:				
A O SMITH 50 GAL GAS WATER HEATER	3				
Madal # CCC 50 400 Sarial # 24	11120202051				
Model # GCG-50-400 Serial # 24	11138202051				
\$1,750					
5. Check only if applicable and check only one box: Collateral is he	eld in a Trust (see UCC1Ad, iter	n 17 and Instructions)	heing administs	red by a Decedent's D	ersonal Representative
6a. Check only if applicable and check only one box: Collateral is ne	au in a musi (see occ IAG, ilei	n ir and maductons)		f applicable and check	<u>-</u>
Public-Finance Transaction Manufactured-Home Tra	ansaction A Debtor is	a Transmitting Utility			
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consig	nor Seller/Buy	er Ba	ilee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DATA:					

## UCC FINANCING STATEMENT ADDENDUM

<b>FOLLOW</b>	INSTRUCTIONS	
FULLUYY		

9a. ORGANIZAT	ION'S NAME						
9b. INDIVIDUAL' SKATES							
	SONAL NAME						
JENNIF:	L NAME(S)/INITIAL(S)		SUFFIX				
ADDITIONAL				THE AROVE S	SPACE I	S FOR FILING OFFIC	F LISE ONLY
DEBTOR'S N	AME: Provide (10a or 10b) only <u>one</u> addit	ional Debtor name or D	ebtor name that did not fit in lin				
	ify, or abbreviate any part of the Debtor's n	ame) and enter the ma	iling address in line 10c				
10a. ORGANIZA	TION'S NAME						
10b. INDIVIDUAL	L'S SURNAME						
INDIVIDUAL	L'S FIRST PERSONAL NAME						
INDIVIDUAL	L'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
. MAILING ADDRI	ESS		CITY		STATE	POSTAL CODE	COUNTR
ADDITION	AL SECUDED DADTV'S NAME A	- IZ ASSICNO	D SECUDED BARTVIS	NAMEL Describes on		(dd ddh)	
ADDITIONA 11a. ORGANIZA	AL SECURED PARTY'S NAME Q	r ✓ ASSIGNO	R SECURED PARTY'S	NAME: Provide on	nly <u>one</u> na	me (11a or 11b)	
		r ASSIGNO	R SECURED PARTY'S	NAME: Provide on	nly <u>one</u> na	me (11a or 11b)	
	TION'S NAME		R SECURED PARTY'S FIRST PERSONAL NAME			me (11a or 11b)	SUFFIX
11a. ORGANIZA	TION'S NAME L'S SURNAME		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	
11a. ORGANIZA	TION'S NAME L'S SURNAME				ADDITIO		
11a. ORGANIZA	TION'S NAME L'S SURNAME		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
11a. ORGANIZA	TION'S NAME L'S SURNAME ESS		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	
11a. ORGANIZA	TION'S NAME L'S SURNAME ESS		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	
11a. ORGANIZA	TION'S NAME L'S SURNAME ESS		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	
11a. ORGANIZA	TION'S NAME L'S SURNAME ESS		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	
11a. ORGANIZA	TION'S NAME L'S SURNAME ESS		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	
11a. ORGANIZA	L'S SURNAME  ESS  SPACE FOR ITEM 4 (Collateral):		FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	
11a. ORGANIZATIONAL MAILING ADDITIONAL S	TION'S NAME L'S SURNAME ESS		FIRST PERSONAL NAME  CITY  14. This FINANCING STATEME	ENT:	ADDITIO	NAL NAME(S)/INITIAL(S)  POSTAL CODE	COUNTR
11a. ORGANIZATIONAL MAILING ADDITIONAL S  This FINANCE REAL ESTATE	L'S SURNAME  ESS  SPACE FOR ITEM 4 (Collateral):  CING STATEMENT is to be filed [for record]	(or recorded) in the	FIRST PERSONAL NAME	ENT:	ADDITIO	NAL NAME(S)/INITIAL(S)  POSTAL CODE	COUNTE
11a. ORGANIZATIONAL SADDITIONAL SADDITIONAL SAL ESTATIONAL SAL EST	L'S SURNAME  ESS  CING STATEMENT is to be filed [for record] TE RECORDS (if applicable)	(or recorded) in the scribed in item 16	FIRST PERSONAL NAME  OITY  14. This FINANCING STATEME  Covers timber to be cut  16. Description of real estate:  101 Meadow Croft (	ENT:  Covers as-e	ADDITIO	NAL NAME(S)/INITIAL(S)  POSTAL CODE	COUNTR
11a. ORGANIZATIONAL MAILING ADDITIONAL S  This FINANCE REAL ESTATIONAL S  Name and address	L'S SURNAME  ESS  CING STATEMENT is to be filed [for record] TE RECORDS (if applicable)  s of a RECORD OWNER of real estate des	(or recorded) in the cribed in item 16	FIRST PERSONAL NAME  CITY  14. This FINANCING STATEME  Covers timber to be cut  16. Description of real estate:	ENT:  Covers as-example of the covers as-examp	ADDITIO STATE	NAL NAME(S)/INITIAL(S)  POSTAL CODE  collateral is filed as	COUNTR