

20240529000159120 05/29/2024 01:00:19 PM UCC1 1/3

A. NAME & PHONE OF CONTACT AT FILER (optional)				
lame: Wolters Kluwer Lien Solutions Phone: 800	-331-3282 Fax: 818-662-4141			
. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com				
SEND ACKNOWLEDGMENT TO: (Name and Address	s) 54923 - RenovateOpco			
Lien Solutions P.O. Box 29071	99083757			
Glendale, CA 91209-9071	ALAL			
	FIXTURE			
				ICE ONLY
File with: Shelby, AL DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or		E ABOVE SPACE IS F		
	FIRST PERSONAL NAME		NAL NAME(S)/INITIAL(S)	SUFFIX
■ 1b. INDIVIDUAL'S SURNAME			LAW	
1b. INDIVIDUAL'S SURNAME HAMEEN	WILDA		` , , , , , , , , , , , , , , , , , , ,	
HAMEEN			` , , , , , , , , , , , , , , , , , , ,	COUNTRY
HAMEEN MAILING ADDRESS	WILDA	LAW		COUNTRY
HAMEEN MAILING ADDRESS 32 ROCKY RIDGE DR DEBTOR'S NAME: Provide only one Debtor name (2a of	CITY HELENA r 2b) (use exact, full name; do not omit, modify, or abbre	STATE AL eviate any part of the Debte	POSTAL CODE 35080-3756 or's name); if any part of the	USA e Individual Deb
	CITY HELENA r 2b) (use exact, full name; do not omit, modify, or abbre	STATE AL eviate any part of the Debte	POSTAL CODE 35080-3756 or's name); if any part of the	USA e Individual Deb
HAMEEN MAILING ADDRESS 32 ROCKY RIDGE DR DEBTOR'S NAME: Provide only one Debtor name (2a of name will not fit in line 2b, leave all of item 2 blank, check here	CITY HELENA r 2b) (use exact, full name; do not omit, modify, or abbre	STATE AL eviate any part of the Debte	POSTAL CODE 35080-3756 or's name); if any part of the	USA e Individual Deb
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HAMEEN MAILING ADDRESS 32 ROCKY RIDGE DR DEBTOR'S NAME: Provide only one Debtor name (2a of name will not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME 2b. INDIVIDUAL'S SURNAME	CITY HELENA r 2b) (use exact, full name; do not omit, modify, or abbree and provide the Individual Debtor information in its second content of the Individua	AL eviate any part of the Debto item 10 of the Financing St	POSTAL CODE 35080-3756 or's name); if any part of the atement Addendum (Form	USA e Individual Deb UCC1Ad)
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Complete only when filing with the Judge of Probate: The initial indebtedness secured by this financing statement is \$0.00 Mortgage tax due (\$.15 per \$100.00 or fraction thereof) \$0.00

5. Check only if applicable and check on	<u>lly</u> one box: Collateral is	ıst (see UCC1Ad, item 17 and	Instructions)	being administered by a Dece	dent's Personal Representative
6a. Check only if applicable and check on	only one box:			6b. Check only if applicable a	and check <u>only</u> one box:
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Transm	itting Utility	Agricultural Lien	Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if app	olicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensee/Licensor
8. OPTIONAL FILER REFERENCE DAT 99083757	A: 3400452				

UCC FINANCING STATEMENT ADDENDUM FOLLOW INSTRUCTIONS 9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here 9a. ORGANIZATION'S NAME 9b. INDIVIDUAL'S SURNAME HAMEEN FIRST PERSONAL NAME WILDA ADDITIONAL NAME(S)/INITIAL(S) **SUFFIX** LAW THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c 10a. ORGANIZATION'S NAME 10b. INDIVIDUAL'S SURNAME INDIVIDUAL'S FIRST PERSONAL NAME **SUFFIX** INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) POSTAL CODE 10c. MAILING ADDRESS CITY STATE COUNTRY ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) ADDITIONAL SECURED PARTY'S NAME <u>or</u> 11a. ORGANIZATION'S NAME 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 11c. MAILING ADDRESS POSTAL CODE COUNTRY CITY STATE 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): 13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the 14. This FINANCING STATEMENT: REAL ESTATE RECORDS (if applicable) is filed as a fixture filing covers timber to be cut covers as-extracted collateral 15. Name and address of a RECORD OWNER of real estate described in item 16 16. Description of real estate: (if Debtor does not have a record interest): Parcel number: 138281004009000 Legal Description- SEC/TWNSHP/RAN 28 20S 03W NBRHD: 06 HELENA TOWNHOMES R-2

WILDA LAW HAMEEN

[See Exhibit for Real Estate]

RenovateOpco Trust

132 ROCKY RIDGE DR

File with: Shelby, AL

3400452

17. MISCELLANEOUS: 99083757-AL-117 54923 - RenovateOpco Trust -

Debtor: HAMEEN, WILDA, LAW

Exhibit for Real Estate

16. Description of real estate: Continued

HELENA AL 35080-3756

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Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
05/29/2024 01:00:19 PM
\$41.00 PAYGE
20240529000159120

