

20240531000162450 05/31/2024 01:48:48 PM UCC7 1/1

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)					
Blake Jones					
B. E-MAIL CONTACT AT SUBMITTER (optional)			Filed and Reco	orded	
blake_jones@trustmark.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)		18	Official Public	Records	C-
C. SEND ACKNOVILLED SWILLY FO. (Haine and Address)			Juage of Proba Clerk	ate, Shelby County Alaba	ma, County
Trustmark National Bank			Shelby County 05/31/2024 01:		
1808 29th Avenue South			\$39.00 PAYGE	i i	
Homewood, AL 35209		STATE NAME	2024053100010	62450	alli 5.
SEE BELOW FOR SECURED PARTY CONTACT INFORMA	ATION	THE ABO	/E SPACE IS FO	R FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS				
20220228000083140	Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in				
2. TERMINATION: Effectiveness of the Financing Statement identified above is	s terminated with resp	ect to the security interest(s) of Secured Part(y)(ies) authorizing this Termi	nation Statement
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and address of a For partial assignment, complete items 7 and 9; check ASSIGN Collateral box is					
4. CONTINUATION: Effectiveness of the Financing Statement identified above additional period provided by applicable law	e with respect to the s	ecurity interest(s) of Secure	ed Party authorizing	this Continuation Statemen	t is continued for the
5. PARTY INFORMATION CHANGE:		···•			
Check one of these two box-	one of these three bo		A 55 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	4- '4 DELETE	• • • • • • • • • • • • • • • • • • •
<u> </u>			ADD name: Comple 7a or 7b, <u>and</u> item 7d	to be deleted in	e: Give record name n item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information Chan 6a. ORGANIZATION'S NAME	ige - provide only one	name (oa or ob)			
Valor Communities, LLC - 105 Hayesbury Lai	ne. Pelham.	AL 35124			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	- , 	ADDITIO	VAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Informat 7a. ORGANIZATION'S NAME	tion Change - provide only	one name (7a or 7b) (use e k act, f	ull name; do not omit, mo	dify, or abbreviate any part of the	Debtor's name)
7a. ORGANIZATION S NAIVIE					
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
		· · · · · · · · · · · · · · · · · · ·			
8. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE co	overed collateral	ASSIGN* collateral
				certain collateral and describe th	
Lot 22, of the Plat of Wynlake, Sector 6, Phase 1, in N	Aap Book 58,	Page 36 in the O	ffice of the J	udge of Probate o	of Shelby
County, Alabama.					
	·				
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS A If this is an Amendment authorized by a DEBTOR, check here and provide n			b) (name of Assigno	or, if this is an Assignment)	
9a. ORGANIZATION'S NAME Transfer and Dank					
OR Trustmark National Bank	EIDOT DEDOOM	AI KIARAE	IADDITIO	NIAL NIANZEZONZINIETIALZON	CITECIV
9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
40 ODTIONAL EILED DEEDENION DATA:					
10. OPTIONAL FILER REFERENCE DATA: PEL-24-2019					
LEULITHUT HULF		Internation	al Association o	of Commercial Admir	nistrators (IACA)
				AA.	; • ; • ****