

20240611000172570 06/11/2024 08:03:53 AM UCC1 1/3

FOLLOW INSTRUCTIONS							
A. NAME & PHONE OF CONTACT AT SUBMITTER (options CSC 1-800-858-5294	al)						
B. E-MAIL CONTACT AT SUBMITTER (optional)							
SPRFiling@cscglobal.com							
C. SEND ACKNOWLEDGMENT TO: (Name and Address)							
2846 15043							
' CSC		'					
801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Ala	hama					
		nelby)					
SEE BELOW FOR SECURED PARTY CONTAC	CT INFORMATION		THE ABOVE	SPACE IS FO	R FILING OFFICE USE	ONLY	
<ol> <li>DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) ( not fit in line 1b, leave all of item 1 blank, check here</li> </ol>					ne); if any part of the Individu t Addendum (Form UCC1Ad)	al Debtor's name will	
1a. ORGANIZATION'S NAME							
OR 15 INDIVIDUAL'S SUDMANE	T	T DEDOONAL MARKE		ADDITIO	TAL NIABACIONABUCIALION	SUFFIX	
` 16. INDIVIDUAL'S SURNAME MERCHANT		FIRST PERSONAL NAME  LATASHA		ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)		
1c. MAILING ADDRESS 1028 KERRY DR	CITY			STATE	POSTAL CODE	COUNTRY	
IC. WAILING ADDRESS TUZO NERKT DR		CALERA		AL	35040	USA	
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (	use exact. full name: do	not omit. modifv. or abbr	eviate any part of t	he Debtor's nan	ne): if any part of the Individua	al Debtor's name will	
not fit in line 2b, leave all of item 2 blank, check here					t Addendum (Form UCC1Ad)		
2a. ORGANIZATION'S NAME							
OR OL INDUITALIS CLIBATATE	Teipo	T DEDOONIAL NIANE		ADDITIO	NAL BIARATION (INUTIAL (O)	TOUEED/	
2b. INDIVIDUAL'S SURNAME	FIRS	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY	
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE OF ASSIGN	SIGNOR SECURED PAR	TY). Provide only one :	Secured Party nan	ne (3a or 3h)			
3a. ORGANIZATION'S NAME Advantage Experts S		trij. Trovide erily <u>erie</u>	Scource raity nam	10 (00 01 05)			
OR							
3b. INDIVIDUAL'S SURNAME	FIRS	FIRST PERSONAL NAME		ADDITIO	ADDITIONAL NAME(S)/INITIAL(S)		
A MANUNICA DE DE COMO A O A O A O A O A O A O A O A O A O	- 400			OTATE	IDOOTAL OODE	OOLINITEDY.	
3c. MAILING ADDRESS 1840 N Greenville Ave STE	-	hardson		STATE	POSTAL CODE 75081	COUNTRY	
4 COLLATEDAL : This form since statement account the fallowing call		i i di di di di		.,,	, 000		
4. COLLATERAL: This financing statement covers the following coll See Exhibit A	aterai:						
The Indebtedness Amount is \$5,800.00							
5. Check only if applicable and check only one box: Collateral is	held in a Trust (see UC	C1Ad, item 17 and Instr	uctions)	peing administer	ed by a Decedent's Persona	al Representative	
6a. Check only if applicable and check only one box:	III III III III III III III III I	w, will it and mou		_	applicable and check only	-	
					ural Lien Non-UC		
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Les	sor Consig	nee/Consignor	Seller/Buyer	Bai	ilee/Bailor Lice	ensee/Licensor	
8. OPTIONAL FILER REFERENCE DATA:						2846 15043	

## UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9b. INDIVIDUAL'S SURNAME						
MERCHANT						
FIRST PERSONAL NAME  LATASHA						
ADDITIONAL NAME(S)/INITIAL(S)	SI	JFFIX				
			THE ABOV	E SPACE	S FOR FILING OFFICE	USE ONLY
DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> additional Debtor name or l do not omit, modify, or abbreviate any part of the Debtor's name) and enter the ma			b or 2b of the Finar	ncing Statem	ent (Form UCC1) (use exact	, full name;
10a. ORGANIZATION'S NAME						
10b. INDIVIDUAL'S SURNAME						
INDIVIDUAL'S FIRST PERSONAL NAME						
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
ADDITIONAL SECURED PARTY'S NAME or ASSIGN 11a. ORGANIZATION'S NAME  11b. INDIVIDUAL'S SURNAME	FIRST PERSON		NAIVIE: Provide o		e (11a or 11b)  NAL NAME(S)/INITIAL(S)	SUFFIX
					<del></del>	
MAILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
ADDITIONAL SEAVE FOR LIEW 4 DOMAIRIAD						
ADDITIONAL SPACE FOR ITEM 4 (Collateral):						
This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANG	CING STATEMI		-extracted co	ollateral 🔽 is filed as a	fixture filing
This FINANCING STATEMENT is to be filed [for record] (or recorded) in the	16. Description ALL THA CITY OF	timber to be cu of real estate: LOT, PI CALERA	ECE OR PA	ARCEL OF SHE	OF LAND, SITUA LBY, STATE OF	TE IN TH
This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)  Name and address of a RECORD OWNER of real estate described in item 16	16. Description ALL THA CITY OF BEING KI GARDEN 49.	timber to be cutof real estate:  CALERA NOWN AI S HOME	ECE OR PA	ARCEL OF SHE IATED	OF LAND, SITUA	ATE IN TI ALABAN 6, KINSA

## **EXHIBIT A**

The following described property as set forth in that certain HVAC RENTAL AGREEMENT dated 4/22/2024, by and between Service Experts Heating & Air Conditioning LLC and the Debtor: A LENNOX indoor air quality component, Model # PCO3-16-16 (Serial # 2124C01649), whether now owned or hereafter acquired, together with all replacements thereof, all attachments, accessories, parts and tools belonging thereto or for use in connection therewith; and any and all products and proceeds of any of the foregoing (including, but not limited to, any claims to any items referred to in this definition, and any claims of Debtor against third parties for loss of, damage to or destruction of any or all of the collateral or for proceeds payable under, or unearned premiums with respect to, policies of insurance) in whatever form, including, but not limited to, all cash, interest, principal, royalties, license fees, rents, dividends, negotiable instruments and other instruments for the payment of money, chattel paper, security agreements and other documents or other property from time to time received, receivable or otherwise distributed in respect of, or in exchange for, the collateral. Said collateral is located at address:

**1028 KERRY DR** 

**CALERA AL 35040** 

THIS FILING IS MADE FOR NOTICE PURPOSES ONLY. THE DEBTOR HAS NO OWNERSHIP RIGHTS IN THE COLLATERAL.

THE DEBTOR IS LEASING THE COLLATERAL.



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
06/11/2024 08:03:53 AM
\$49.70 PAYGE

20240611000172570

alli 5. Beyl