20240731000236120 07/31/2024 08:41:51 AM UCC1 1/2

UCC FINANCING STATEMENT

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)				
2890 07124 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed I	In: Alabama			
SEE BELOW FOR SECURED PARTY CONTACT INFORMAT	(Shelby) TION			.
1. DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact, full na	THE ABOVE		me); if any part of the Individual	
	the Individual Debtor information in item 10 of the F			Debtor 3 name win
1a. ORGANIZATION'S NAME				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIO	NAL NAME/SY/INITIAL/SY	SUFFIX
HYATT	SUSAN	ADDITIC	ADDITIONAL NAME(S)/INITIAL(S)	
1c. MAILING ADDRESS 251 CREEKSIDE LANE	CITY	STATE	STATE POSTAL CODE	
	PELHAM	AL	35124	USA
2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full na				Debtor's name will
not fit in line 2b, leave all of item 2 blank, check here 2a. ORGANIZATION'S NAME	the Individual Debtor information in item 10 of the I	rinancing Stateme	nt Addendum (Form OCCTAd)	
Za. Ortoanization o name				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED State				
3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIC	NAL NAME(S)/INITIAL(S)	SUFFIX
3c. MAILING ADDRESS Fifth Third Bank Dividend, 38 Fountain Sq Plaza, 1MOBA5	Cincinnati	STATE	POSTAL CODE 45263	COUNTRY
4. COLLATERAL: This financing statement covers the following collateral: ALL OF THE DEBTORS RIGHT TITLE AND INTERE	ST IN HOME IMPROVEME	NT PRODU	JCTS EQUIPMEN	 T AND
FIXTURES (CONSUMER GOODS) LOCATED AT O				
FINANCED BY AND SUBJECT TO FIFTH THIRD BA	· ·			
ADDITION THE SECURITY INTEREST INCLUDES RESPECT TO THE REFERENCED COLLATERAL A				
COLLATERAL THAT DEBTOR MAY RECEIVE OR E				
5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is held in a Trust	(see UCC1Ad, item 17 and Instructions)	heina administa	red by a Decedent's Personal	Representative
6a. Check only if applicable and check only one box:	(300 000 IAG, ICHI II and Institutions)	_	if applicable and check <u>only</u> on	•
Public-Finance Transaction Manufactured-Home Transaction	A Debtor is a Transmitting Utility	Agricu	tural Lien Non-UCC	Filing
7. ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor Seller/Buye	er 🔲 Ba	ailee/Bailor Licen	see/Licensor
8. OPTIONAL FILER REFERENCE DATA:				2890 0712

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX	9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if	line 1b was left blank				
HYAIT FIRST PERSONAL NAME SUSAN ADDITIONAL MARKES(NINTAL (8) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS THE ABOVE OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY THE ABOVE SPA						
HYATT FIRST PERSONAL NAME SUSAN ### ABOVE SPACE IS FOR FILING OFFICE USE ONLY ### ABOVE SPACE IS FOR FILING OFFICE USE ONLY ### ABOVE SPACE IS FOR FILING OFFICE USE ONLY #### ABOVE SPACE IS FOR FILING OFFICE USE ONLY ###################################						
SUSAN ### ABOVE SPACE IS FOR FILING OFFICE USE ONLY #### ABOVE SPACE IS FOR FILING OFFICE USE ONLY ###################################	9b. INDIVIDUAL'S SURNAME					
10. DEBTOR'S NAME: Provide (*Go or 100) only gage additional Debtor name or Debtor name trait did not fit in line 10 or 25 of the Philation g Statement (Form JCCI) (see essect, full name), and and unall, modify, or absentiated any part of the Debtor's name) and ender the modify address in line 100. 109. ORGANIZATION'S NAME 109. ORGANIZATION'S NAME INDIVIDUAL'S SURNAME. INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL SECURED PARTY'S NAME of CITY STATE POSTAL CODE. COUNTRY 11. □ ADDITIONAL SECURED PARTY'S NAME of CITY STATE POSTAL CODE. COUNTRY 11. □ ADDITIONAL SECURED PARTY'S NAME of CITY STATE POSTAL CODE. COUNTRY 11. □ ADDITIONAL SECURED PARTY'S NAME. FIRST PERSONAL NAME. ADDITIONAL NAME(SYNTIAL(S)) SUFFIX. CITY STATE POSTAL CODE. COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collisteral): THE REAL STATE SECONDS (if applicable) 13. ☑ The INNAMICING STATEMENT is to be fise for record (or records) in the Party of Country State (Country Name and State Seconds (or seconds) in the Party State (Country Name and State Seconds) (if applicable) 15. Name are sections of a RECORD ONNER of real estate described in item 16 (if Debtor occurred two a stood interest) 15. Name are sections of a RECORD ONNER of real estate described in item 16 (if Debtor occurred two a stood interest) 15. Name are sections of a RECORD ONNER of real estate described in item 16 (if Debtor occurred two a stood interest) 15. Name are sections of a RECORD ONNER of real estate described in item 16 (if Debtor occurred two a stood interest) 15. Name are sections of a RECORD ONNER of real estate described in item 16 (if Debtor occurred two a stood interest) 15. Name are sections of a RECORD ONNER of real estate described in item 16 (if Debtor occurred two a stood interest) 15. Name are sections of a RECORD ONNER of real estate described in item 16 (if Debtor occurred two as stood interest) 15. Name are sections of two as stood interest. 16. Described on test estate. 17. This FINANCING STATEMENT is to be set (if the						
do not arrit mody go abbreviate any part of the Deblor's name) and enter the mailing autoress in time 100 Top. (NORMANIATION'S NAME) TOP. (NORMANIATION'S NAME) INDIVIDUAL'S SURNAME INDIVIDUAL'S SURNAME INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S) STATE INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S) TITL (NORMANIATION'S NAME) OR 115. (NORMANIATION'S NAME) OR 115. (NORMANIATION'S NAME) OR 115. (NORMANIATION'S SURNAME) TITL (NOR	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	THE ABOVE S	SPACE	IS FOR FILING OFFICE	USE ONLY
OR 100. INDIVIDUAL'S SURNAME INDIVIDUAL'S ADDITIONAL NAME(SYNTHAL(S)) 101. MALLING ADDRESS CITY STATE POSTAL CODE COUNTRY 11. □ ADDITIONAL SECURED PARTY'S NAME PREST PERSONAL NAME FIRST PERSONAL NAME PREST PERSONAL NAME ADDITIONAL SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL SURNAME ADDITIONAL NAME(SYNTHAL(S)) STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): FIEID and Recorded Official Public Records			b or 2b of the Financir	ng Staten	nent (Form UCC1) (use exac	t, full name;
INDIVIDUAL'S FIRST PERSONAL NAME INDIVIDUAL'S ADDITIONAL NAME(S)INITIAL(S) 10c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME CITY STATE POSTAL CODE COUNTRY 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collatoral): FILICA MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collatoral): FILICA MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collatoral): FILICA MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 13. ▼ This FINANCING STATEMENT is to be filed for record (or recorded) in them 14. This FINANCING STATEMENT is to be filed for record (or recorded) in them 15. Name and address of a RECORD OWNER of real status described in item 18 (if) Debtor case of Pages a record primes*: SUSAN HYATT, 251 CREEKSIDE LANE, PELHAM, AL 35124 LOT 194, ACCORDING TO THE FINAL SUBDIVISION PLAT OI HOLLAND LAKES, SECTOR 3, AS RECORDED IN MAP BOOK 37, PAGE 85 IN THE PROBATE OFFICE OF SHELBY COUNTY ALABAMA.						
10c. MAILING ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME 11c. MAILING ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME 11c. MAILING ADDRESS 11c. MAILING ADDRESS 11c. MAILING ADDRESS 11d. MAILING ADDRESS	10b. INDIVIDUAL'S SURNAME					
10c. WAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 11. ADDITIONAL SECURED PARTY'S NAME IT IS ORGANIZATION'S NAME OR THE INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(SYINITIAL'S) STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): Filed and Recorded Official Public Records of Greated Product, Shelty County Alabama, Country Selective County Alabama, Country Selective County Alabama, Country Selective County Alabama, Country Selective Country Selective Country Alabama, Country Selective Count	INDIVIDUAL'S FIRST PERSONAL NAME					
11. ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b) 11a. ORGANIZATION'S NAME OR 11b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)INITIAL(S) SUFFIX 11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY 12. ADDITIONAL SPACE FOR ITEM 4 (Collateral): Filed and Recorded Official Public Records Judge of Probate, Skelby County, ALL Mail 200 (Party 10 (All And	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
113. ORGANIZATIONS NAME OR 1116. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME FIRST PERSONAL NAME FIRST PERSONAL NAME ADDITIONAL NAME(SVINITIAL(S) SUFFIX FILE AND ADDITIONAL NAME(SVINITIAL(S) STATE POSTAL CODE COUNTRY FILE AND ADDITIONAL SPACE FOR ITEM 4 (Collateral): Filed and Recorded Official Publis Records Judge of Probate, Shelty County Alabama, County Clerk Shelty County, AL 873010/124 08:41:51 AM \$3500 PAYCE 2024/17/31/09/02/36/31/31 AM \$3500 PAYCE 2024/17/31/09/02/36/31 AM \$3500 PAYCE 2024/17/31/02/02/	10c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): SUSAN HYATT, 251 CREEKSIDE LANE, PELHAM, AL 35124 14. This FINANCING STATEMENT: covers timber to be cut overs as-extracted collateral is filed as a fixture filing 16. Description of real estate: THE FOLLOWING DESCRIBED REAL ESTATE, SITUATED IN SHELBY COUNTY, ALABAMA. LOT 194, ACCORDING TO THE FINAL SUBDIVISION PLAT OF HOLLAND LAKES, SECTOR 3, AS RECORDED IN MAP BOOK 37, PAGE 85 IN THE PROBATE OFFICE OF SHELBY COUNTY ALABAMA.	OR	FIRST PERSONAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
13. This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable) 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): SUSAN HYATT, 251 CREEKSIDE LANE, PELHAM, AL 35124 This FINANCING STATEMENT:	11c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
TEAL ESTATE RECORDS (if applicable) Covers timber to be cut Covers as-extracted collateral Image: Is filed as a fixture filing		ZA HANNA	Official Pu Judge of P Clerk Shelby Cor 07/31/2024 \$39.00 PAY 202407310	ublic Reco Probate, Sh unty, AL 4 08:41:51 YGE	nelby County Alabama, County AM	
HOLLAND LAKES, SECTOR 3, AS RECORDED IN MAP BOOK 37, PAGE 85 IN THE PROBATE OFFICE OF SHELBY COUNTY ALABAMA.	REAL ESTATE RECORDS (if applicable) 15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest): SUSAN HYATT, 251 CREEKSIDE LANE,	covers timber to be cut 16. Description of real estate: THE FOLLOWING	covers as-ex			
PIN: 137261006065000		HOLLAND LAKES, 37, PAGE 85 IN TH	SECTOR 3,	AS R	ECORDED IN M.	AP BOOK
		PIN: 13726100606	5000			