20240906000278000 09/06/2024 12:47:34 PM UCC1 1/3

	CC FINANCING STATEMENT				
	DLLOW INSTRUCTIONS NAME & PHONE OF CONTACT AT FILER (optional)				
В.	E-MAIL CONTACT AT FILER (optional)				
C.	SEND ACKNOWLEDGMENT TO: (Name and Address)				
	MCPHAIL SANCHEZ, LLC PO BOX 870				
	MOBILE, AL 36602-3226				
		THE ABO	VE SPACE	IS FOR FILING OFFICE US	SE ONLY
1.	DEBTOR'S NAME: Provide only <u>one</u> Debtor name (1a or 1b) (use exact, name will not fit in line 1b, leave all of item 1 blank, check here and provid				
	1a. ORGANIZATION'S NAME	e the maividual Debtor information in item 10 or the r	manong otat	ement Addendam (Form OCC	TAU)
OR					
OK	1b. INDIVIDUAL'S SURNAME MORTON	FIRST PERSONAL NAME CHRISTY	ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX
	MAILING ADDRESS 17 FIELDSTONE CIR	CITY HELENA	STATE AL	POSTAL CODE 35080	COUNTRY USA
2.	DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact,				
	name will not fit in line 2b, leave all of item 2 blank, check here and provided as ORGANIZATION'S NAME	le the Individual Debtor information in item 10 of the l	Financing Sta	tement Addendum (Form UCC	C1Ad)
	Za. ORGANIZATION S NAIVIE				
OR	2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX
				_	
2c. f	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
3.	SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR S	SECURED PARTY): Provide only one Secured Party	name (3a or 3	3b)	
	3a. ORGANIZATION'S NAME		(
OR	ALABAMA POWER COMPANY	TELDOT DEDOONAL NIAME	TARRITIONA	L NIA NATIONALITIA LAGO	Touren
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX
	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
120	00 6 TH AVE N	BIRMINGHAM	AL	35203	
4.	COLLATERAL: This financing statement covers the following collateral:				
	AC Replacement,A/C with Gas Furnace,Removed old heat		_	• • • • • • • • • • • • • • • • • • •	
•	stems,SA1424BJ1NA,W0622237814,Sure Comfort HVAC R mfort heating and cooling systems,SA1424BJ1NA,W06222	·	noved old l	heat/cool systems, inst	alled new Sure
00	inion nearing and occurry systems, or thezabornit, woozzz	1021,0arc Common			
\$12	2800.00				
5. 0	Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is 🔲 held in a Tru	st (see UCC1Ad, item 17 and Instructions)	ing administe	red by a Decedent's Personal	Representative
6 a.	Check only if applicable and check only one box:	6 b. Cł	neck <u>only</u> if ap	plicable and check <u>only</u> one b	ox:
	☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐	A Debtor is a Transmitting Utility	Agricultural	Lien Non-UCC Filing	
7. <i>A</i>	ALTERNATIVE DESIGNATION (if applicable): Lessee/Lessor	Consignee/Consignor Seller/Buyer	Bailee/Ba	ilor Licensee/Licens	or
8. 0	OPTIONAL FILER REFERENCE DATA:				
\$12	2800.00	Shelby County			

	C FINANCING STATEMENT ADDENDUNOW INSTRUCTIONS	1					
	ME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Staten	nent: if line 1b was left b	olank	1			
	cause Individual Debtor name did not fit, check here						
	9a. ORGANIZATION'S NAME						
				4			
				4			
OR	9b. INDIVIDUAL'S SURNAME MORTON						
				_			
	FIRST PERSONAL NAME CHRISTY						
			Lourrix	-			
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX	I ₊		SPACE IS FOR FILING	OFFICE LISE ONLY
10 D	L E BTOR'S NAME : Provide (10a or 10b) only <u>one</u> additional Debtor nam	ne or Debtor name that	did not fit in line 1b o				
	not omit, modify, or abbreviate any part of the Debtor's name) and enter th					atement (Form OCCT) (use	e exact, full flaffle,
10	a. ORGANIZATION'S NAME						
1	b. INDIVIDUAL'S SURNAME						
	DD. INDIVIDUAL S SCICINAIVIL						
OR -	INDIVIDUAL'S FIRST PERSONAL NAME						
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)						SUFFIX
10c. MA	ILING ADDRESS	CITY			STATE	POSTAL CODE 35080	COUNTRY
11.	ADDITIONAL SECURED PARTY'S NAME or ASSIG	NOR SECURED	PARTY'S NAME	: Provide o	nly <u>one</u> nam	e (11a or 11b)	•
1	a. ORGANIZATION'S NAME					<u> </u>	
OR -							
	b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NA	AME		ADDITIONA	L NAME(S)/INITIAL(S)	SUFFIX
44 - 144		OUTV			OTATE	TROOTAL CORE	OOLINTDY
TTC. IVIA	ILING ADDRESS	CITY			STATE	POSTAL CODE	COUNTRY
12 ΔΓ	DITIONAL SPACE FOR ITEM 4 (Collateral):						
12.71	DITIONAL OF ACE FOR THE WITH (Contaction).						
40 🔽		14 This FIN	ANCING STATEMEN	IT.			
13.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in REAL ESTATE RECORDS (if applicable)		ers timber to be cut		covers as-e	xtracted collateral	is filed as a fixture filing
15. Na	me and address of a RECORD OWNER of real estate described in item 10		ion of real estate:				<u> </u>
(if	Debtor does not have a record interest):	Source of	Title: Inst# 2006	5011800	0027810.	Legal Description:	See attached.
17 M	SCELLANEOUS:						
ı IVII							

Please type or laser-print this form. Be sure it is completely legible. Read and follow all Instructions; use of the correct name for the Debtor is crucial.

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20060118000027810 1/1 \$21.00 Shelby Cnty Judge of Probate, AL 01/18/2006 01:55:07PM FILED/CERT

QUIT CLAIM DEED

STATE OF ALABAMA COUNTY OF JEFFERSON

That in consideration of One Hundred and no/100s Dollars [\$100.00] and other good and valuable consideration to the undersigned Grantor, Christy Neal, also known as Christy Neal Morton, a married woman, in hand paid by the Grantees herein, the receipt of which is hereby acknowledged, the said Grantor does by these presents, remise, release, quitclaim and convey unto Christy Neal Morton and Benjamin F. Morton, husband and wife, as joint tenants with rights of survivorship, referred to as Grantees) the following described real estate in fee simple, situated in Jefferson County, Alabama, to wit:

1717 Fieldstone Circle, Helena, AL 35080

Lot 53, according to the survey of 2nd Sector, Fieldstone Park, as recorded in Map Book 16, Page 114, in the Probate Office of Shelby County, Alabama.

Parcel ID#: 13-5-21-4-003-065.000-RR

TO HAVE AND TO HOLD, to the said GRANTEES, his heirs, executors, successors and assigns forever.

IN WITNESS WHEREOF, the said GRANTORS, who are authorized to execute this conveyance, have hereto set their signature and seal, this the _____ day of _______, 20_06_.

Wristy Weal aka Christy Neal Morton

GRANTOR, Christy Neal aka Christy Neal Morton

STATE of ALABAMA COUNTY of Jefferson

Shelby County, AL 01/18/2006 State of Alabama

Deed Tax:\$10.00

I, the undersigned, a Notary Public in and for said County in said State, hereby certify that Christy Neal aka Christy Neal Morton, a married woman, whose name is signed to the foregoing conveyance, and who is known to me, acknowledged before me on this day that, being informed of the contents of the conveyance, she executed the same voluntarily on the day the same bears date.

Given under my hand and official seal, this

day of micary 2050

My Commission Expires: 12/1

SEND TAX NOTICE TO:

1717 Fieldstone Circle

Ms. Christy Neal

INSTRUMENT PREPARED BY: Law Office of Sherry H Thomas, LLC Chase Commerce Park, Suite 109 3821 Lorna Road

Birmingham. AL 35244

Helena, AL 35080
Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
09/06/2024 12:47:34 PM

\$60.20 BRITTANI

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