20240918000291680 09/18/2024 01:57:28 PM UCC6 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) blake_jones@trustmark.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)		Filed and Recorded Official Public Records Judge of Probate, Shelby County Clerk Shelby County, AL	Alabama, County
Trustmark National Bank 1808 29th Avenue South Homewood, AL 35209		09/18/2024 01:57:28 PM \$.00 JOANN 20240918000291680	
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION		PACE IS FOR FILING OFFICE U	ISE ONI V
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20220228000083140	1b. This FINANCING STATES (or recorded) in the REAL	MENT AMENDMENT is to be filed [for	r record]
2. TERMINATION: Effectiveness of the Financing Statement identified above is terminated with		`	
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and address of Assignee in item	Ze and name of Assignor in item 9		
For partial assignment, complete items 7 and 9; check ASSIGN Collateral box in Item 8 and des			
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to additional period provided by applicable law	the security interest(s) of Secured Par	rty authorizing this Continuation State	ment is continued for the
5. PARTY INFORMATION CHANGE: Check one of these two box- AND Check one of these three			
This Change affects Debtor or Secured Party of record item 6a or 6b; and item 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only	d/or address: Complete em 7a or 7b <u>and</u> item 7c 7a or 7 y <u>one</u> name (6a or 6b)	name: Complete item DELETE no 7b, <u>and</u> item 7c to be delete	ame: Give record name ed in item 6a or 6b
6a. ORGANIZATION'S NAME Valor Communities, LLC			
OR	SONAL NAME	ADDITIONAL NAME(S)/INITIAL(S	S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide	only <u>one</u> name (7a or 7b) (use exact, full name	e; do not omit, modify, or abbreviate any part of	the Debtor's name)
7a. ORGANIZATION'S NAME			
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 covered collateral	ASSIGN* collateral
 Lot 20 of the Plat of Wynlake, Sector 6, Phase 1 in Map Book 58 County, Alabama. 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing an Organization's NAME 	Provide only <u>one</u> name (9a or 9b) (na	of the Judge of Probate	of Shelby
OR 9b. INDIVIDUAL'S SURNAME	SONAL NAME	ADDITIONAL NAME(S)/INITIAL(S	S) SUFFIX
PID INDIVIDUAL 3 SURINAIVIE	SONAL NAIVIE	TADDITIONAL NAME(S)/INITIAL(S	S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA: PEL -24-2278			