



UCC FINANCING STATEMENT AMENDMENT
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Name: Wolters Kluwer Lien Solutions Phone: 800-331-3282 Fax: 818-662-4141	
B. E-MAIL CONTACT AT FILER (optional) uccfilingreturn@wolterskluwer.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) 52805 - Concord -	
Lien Solutions P.O. Box 29071 Glendale, CA 91209-9071	103874374 ALAL FIXTURE
File with: Shelby, AL	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 20160310000077970 3/10/2016 CC AL Shelby	1b. <input checked="" type="checkbox"/> This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: <u>attach</u> Amendment Addendum (Form UCC3Ad) <u>and</u> provide Debtor's name in item 13				
2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement					
3. <input type="checkbox"/> ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, <u>and</u> address of Assignee in item 7c <u>and</u> name of Assignor in item 9 For partial assignment, complete items 7 and 9 <u>and</u> also indicate affected collateral in item 8					
4. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law					
5. <input type="checkbox"/> PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes: <u>AND</u> Check <u>one</u> of these three boxes to: This Change affects <input type="checkbox"/> Debtor <u>or</u> <input type="checkbox"/> Secured Party of record <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b; <u>and</u> item 7a or 7b <u>and</u> item 7c <input type="checkbox"/> ADD name: Complete item 7a or 7b, <u>and</u> item 7c <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b					
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)					
6a. ORGANIZATION'S NAME					
OR	<table><tr><td>6b. INDIVIDUAL'S SURNAME WALTHER</td><td>FIRST PERSONAL NAME CAROL</td><td>ADDITIONAL NAME(S)/INITIAL(S) H</td><td>SUFFIX</td></tr></table>	6b. INDIVIDUAL'S SURNAME WALTHER	FIRST PERSONAL NAME CAROL	ADDITIONAL NAME(S)/INITIAL(S) H	SUFFIX
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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; do not omit, modify, or abbreviate any part of the Debtor's name)					
7a. ORGANIZATION'S NAME					
OR	<table><tr><td>7b. INDIVIDUAL'S SURNAME</td></tr><tr><td>INDIVIDUAL'S FIRST PERSONAL NAME</td></tr><tr><td>INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)</td></tr><tr><td>SUFFIX</td></tr></table>	7b. INDIVIDUAL'S SURNAME	INDIVIDUAL'S FIRST PERSONAL NAME	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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. <input type="checkbox"/> COLLATERAL CHANGE: <u>Also</u> check <u>one</u> of these four boxes: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN collateral Indicate collateral:					

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only <u>one</u> name (9a or 9b) (name of Assignor, if this is an Assignment) If this is an Amendment authorized by a DEBTOR, check here <input type="checkbox"/> and provide name of authorizing Debtor					
9a. ORGANIZATION'S NAME WF HIL 2020-2 Grantor Trust c/o Wilmington Savings Fund Society, FSB, as Owner Trustee					
OR	<table><tr><td>9b. INDIVIDUAL'S SURNAME</td><td>FIRST PERSONAL NAME</td><td>ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr></table>	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: WALTHER, CAROL H 103874374 Waterfall 20160678324					



UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 20160310000077970 3/10/2016 CC AL Shelby	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form	
OR	12a. ORGANIZATION'S NAME WF HIL 2020-2 Grantor Trust c/o Wilmington Savings Fund Society, FSB, as Owner Trustee
	12b. INDIVIDUAL'S SURNAME
	FIRST PERSONAL NAME
	ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

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13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only <u>one</u> Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit			
OR	13a. ORGANIZATION'S NAME		
	13b. INDIVIDUAL'S SURNAME WALTHER	FIRST PERSONAL NAME CAROL	ADDITIONAL NAME(S)/INITIAL(S) H SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):
Debtor Name and Address:
WALTHER, CAROL H - 412 MCCORMACK WAY , BIRMINGHAM, AL 35242
WALTHER, WILLIAM E - 412 MCCORMACK WAY , BIRMINGHAM, AL 35242

Secured Party Name and Address:
WF HIL 2020-2 Grantor Trust c/o Wilmington Savings Fund Society, FSB, as Owner Trustee - 500 Delaware Avenue 11th Floor, Wilmington, DE 19801



15. This FINANCING STATEMENT AMENDMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing	17. Description of real estate: Legal Description: County: SHELBY, AL APN: 03-5-22-1-003-019-000 Census Tract / Block: 302.17 / 3 Alternate APN: Township-Range-Sect: 18-1W-22 Subdivision: GREYSTONE LEGACY 3RD SECTOR Legal Book/Page: 27-109 Map Reference: / Legal Lot: 319 Tract #: [See Exhibit for Real Estate]
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	

18. MISCELLANEOUS: 103874374-AL-117 52805 - Concord - Redbrick WF HIL 2020-2 Grantor Trust c/o File with: Shelby, AL Waterfall 20160678324

Debtor: WALTHER, CAROL, H

Exhibit for Real Estate

17. Description of real estate: Continued

Legal Block: School District: 2
Market Area: School District Name: SHELBY COUNTY
SCHOOL DISTRICT
Neighbor Code: DM1 Munic/Township: HOOVER

SHELBY, AL



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
04/23/2025 08:04:39 AM
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Allen S. Bayl

