	Record at the request of and
	when recorded return to:
	GoodLeap, LLC



202505050000134110 1/2 \$.00 Shelby Cnty Judge of Probate, AL 05/05/2025 03:04:29 PM FILED/CERT

UCC FINANCING STATEME FOLLOW INSTRUCTIONS	ENT AMEND	MENT						
A. NAME & PHONE OF CONTACT AT SUB	MITTER (optional)							
B. E-MAIL CONTACT AT SUBMITTER (option filings@goodleapsupport.co	m	•						
C. SEND ACKNOWLEDGMENT TO: (Nam	e and Address)		7	•				
GoodLeap LLC				_				
PO Box # 981440 El Paso, TX 79998- 1440								
SEE BELOW FOR SECURED	PARTY CONTACT IN	FORMATIC	ON ·	THE ABO	VE SPAC	E IS FO	R FILING OFFICE USE	ONLY
1a, INITIAL FINANCING STATEMENT FILE NUMBER 07/08/2024 202407080002043	_		n real and and	1b. This FINANCING Sometime (or recorded) in the (Form UCC3Ad) ar	REALES	STATE REC	OMENT is to be filed [for reco CORDS. Filer: <u>attach</u> Amend name in item 13.	ord] ment Addendum
2. TERMINATION: Effectiveness of the Finan	ncing Statement identified	above is term	minated with res	pect to the security interest((s) of Secu	red Part(y	(ies) authorizing this Termin	ation Statement
3. ASSIGNMENT: Provide name of Assigned For partial assignment, complete items 7 and	in item 7a or 7b, <u>and</u> add 9; check ASSIGN Collate	dress of Assig	gnee in item 7c <u>:</u> m 8 and describ	and name of Assignor in iter e the affected collateral in it	m 9 tem 8			
4. CONTINUATION: Effectiveness of the Fire additional period provided by applicable law	ancing Statement identific	ed above with	n respect to the	security interest(s) of Secure	ed Party a	uthorizing	this Continuation Statement	is continued for the
5. PARTY INFORMATION CHANGE:		_	`					
Check one of these two boxes:		· · · · · ·	of these three bo E name and/or a		ADD name	e: Comple	te item DELETE name:	Give record name
This Change affects Debtor or Secured 6. CURRENT RECORD INFORMATION: Co		item 6a	or 6b; <u>and</u> item	7a or 7b <u>and</u> item 7c	7a or 7b, <u>a</u>	and item 7	to be deleted in	
6a. ORGANIZATION'S NAME	<u> </u>		<u> </u>	<u> </u>				
OR 6b. INDIVIDUAL'S SURNAME		1	EIDOT DEDOON	AL NIARAC		ADDITION	LAL NIABATION/(NUTLATION	Toursey
Bates			FIRST PERSON Janet	IAL NAME		ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION:	Complete for Assignment or Part	ty Information Ch	hange - provide only	one name (7a or 7b) (use exact, fo	ull name; do	not omit, mo	dify, or abbreviate any part of the D	ebtor's name)
7a. ORGANIZATION'S NAME	•							
OR 7b. INDIVIDUAL'S SURNAME	r			<u> </u>				
INDIVIDUAL'S FIRST PERSONAL NAME			. .					
INDIVIDUAL'S ADDITIONAL NAME(S)/INIT	TÄL(S)						_	SUFFIX
-7c-MAILING ADDRESS			CITY			STATE	POSTAL CODE	COUNTRY
	•			•				
8. COLLATERAL CHANGE: Check only	one box:	ADD o	collateral	DELETE collateral	R	ESTATE co	vered collateral	ASSIGN* collateral
Indicate collateral:		*Check ASSI	IGN COLLATERAL (nly if the assignee's power to ame	end the recor	d is limited to	certain collateral and describe the	collateral in Section 8
	•							
9. NAME OF SECURED PARTY OF RECO	ORD AUTHORIZING	THIS AMEN	VDMENT Pro	ide only one name (9a or 9	h) (name	of Assigno	r if this is an Assignment)	
If this is an Amendment authorized by a DEBTO			of authorizing D			oi MaaigiiU	.,	
9a. ORGANIZATION'S NAME GoodLeap LLC								
OR 95. INDIVIDUAL'S SURNAME	E	Ţı	FIRST PERSON	AL NAME		ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
	I		<u> </u>				· ·	
10. OPTIONAL FILER REFERENCE DATA: 2404200840 FIXTERM	Janët Bates &	Eduard	o Martine	Z		S	helby	



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	INTIAL FINANCING STATEMENT FILE NUMBER: Same as 08/2024 20240708000204300 Shelby,		endment form		,	•	
	AME OF PARTY AUTHORIZING THIS AMENDMENT: Sam		mendment form		•		
- 1	2a. ORGANIZATION'S NAME GoodLeap LLC						
-							
			.d				
· -	2b. INDIVIDUAL'S SURNAME		<u> </u>				
-	FIRST PERSONAL NAME						
		-					
	ADDITIONAL NAME(S)/INITIAL(S)		St	JFFIX			
				,	-	E SPACE IS FOR FILING OFFICE	
. IN	ame of DEBTOR on related financing statement (Name of a ne Debtor name (13a or 13b) (use exact, full name; do not omit, mo	a current Debtor o dify, or abbreviat	of record required se any part of the	l for indexing pu Debtor's name)	rposes only in som ; see Instructions if	e filing offices - see Instruction item 13): name does not fit	Provide only
[3a. ORGANIZATION'S NAME						
<u>.</u>	3b. INDIVIDUAL'S SURNAME		TEIDET DEDEON	IAL NARAC		LADDITIONAL MANAGERS (INITIALIES	Tours
Ι.	Bates		Janet	NAL NAIVIE	•	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
L A	ODITIONAL SPACE FOR (CHECK ONE BOX):	ITEM 8 (Coll		OTH	R INFORMATIO	N (Please Describe)	
		•					
					-		
						•	
						•	
				•			
	is FINANCING STATEMENT AMENDMENT:			17. Description	of real estate:		
TI	tis FINANCING STATEMENT AMENDMENT: covers timber to be cut covers as-extracted collateral	is filed as		17. Description		RCE, CHELSEA, AL 350	43
N				•		RCE, CHELSEA, AL 350	43
N (if	covers timber to be cut covers as-extracted collateral ame and address of a RECORD OWNER of real estate described in			480 BEN	T CREEK T	RCE, CHELSEA, AL 350	43
N (if	covers timber to be cut covers as-extracted collateral ame and address of a RECORD OWNER of real estate described in Debtor does not have a record interest):			480 BEN	T CREEK T		43
N (if	covers timber to be cut covers as-extracted collateral ame and address of a RECORD OWNER of real estate described in Debtor does not have a record interest):			480 BEN	T CREEK To Shelby	002041000	
N (if	covers timber to be cut covers as-extracted collateral ame and address of a RECORD OWNER of real estate described in Debtor does not have a record interest):			480 BEN COUNT AF	T CREEK To Shelby N 1411210		
N (if	covers timber to be cut covers as-extracted collateral ame and address of a RECORD OWNER of real estate described in Debtor does not have a record interest):			480 BEN	T CREEK To Shelby N 1411210	002041000	
. N (ii	covers timber to be cut covers as-extracted collateral ame and address of a RECORD OWNER of real estate described in Debtor does not have a record interest):			480 BEN COUNT AF	T CREEK To Shelby N 1411210	002041000	