



UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) Jeffrey Snyder (305) 374-7580	
B. E-MAIL CONTACT AT SUBMITTER (optional)	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div>Bilzin Sumberg 1450 Brickell Avenue, 23rd Floor Miami, FL 33131</div> <div>SEE BELOW FOR SECURED PARTY CONTACT INFORMATION</div>	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER # 20150612000197710 filed 6/12/15	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 type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Part(y)(ies) authorizing this Termination Statement																							
3. <input checked="" type="checkbox"/> ASSIGNMENT: 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; check ASSIGN Collateral box in item 8 and describe the 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: <input type="checkbox"/> Debtor <u>or</u> <input type="checkbox"/> Secured Party of record <u>AND</u> Check <u>one</u> of these three boxes to: <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)																							
<table><tr><td rowspan="2">OR</td><td colspan="4">6a. ORGANIZATION'S NAME</td></tr><tr><td>6b. INDIVIDUAL'S SURNAME</td><td>FIRST PERSONAL NAME</td><td>ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr></table>		OR	6a. ORGANIZATION'S NAME				6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX													
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	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(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; do not omit, modify, or abbreviate any part of the Debtor's name)																							
<table><tr><td rowspan="4">OR</td><td colspan="4">7a. ORGANIZATION'S NAME</td></tr><tr><td colspan="4">RSS JPMBB2015-C31 - DE HSP, LLC</td></tr><tr><td colspan="4">7b. INDIVIDUAL'S SURNAME</td></tr><tr><td colspan="4">INDIVIDUAL'S FIRST PERSONAL NAME</td></tr><tr><td colspan="4">INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr></table>		OR	7a. ORGANIZATION'S NAME				RSS JPMBB2015-C31 - DE HSP, LLC				7b. INDIVIDUAL'S SURNAME				INDIVIDUAL'S FIRST PERSONAL NAME				INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
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INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX																			
7c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY																		
200 South Biscayne Boulevard, Suite 3550		Miami	FL	33131	USA																		
8. <input type="checkbox"/> COLLATERAL CHANGE: Check only <u>one</u> box: Indicate collateral:		<input type="checkbox"/> ADD collateral	<input type="checkbox"/> DELETE collateral	<input type="checkbox"/> RESTATE covered collateral	<input type="checkbox"/> ASSIGN* collateral																		
		*Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to certain collateral and describe the collateral in Section 8																					

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				
OR	9a. ORGANIZATION'S NAME			
	WELLS FARGO BANK, NATIONAL ASSOCIATION, AS TRUSTEE*			
OR	9b. INDIVIDUAL'S SURNAME			
	FIRST PERSONAL NAME			
ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX

10. OPTIONAL FILER REFERENCE DATA:
Sunbelt Portfolio - Inverness Center - 30309957 - to be filed with SHELBY COUNTY, AL

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

20150612000197710 filed 6/12/15

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a. ORGANIZATION'S NAME

WELLS FARGO BANK, NATIONAL ASSOCIATION, AS TRUSTEE*

OR

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 one 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

13a. ORGANIZATION'S NAME

HPT SUNBELT PORTFOLIO, LLC

OR

13b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR (CHECK ONE BOX): ☐ ITEM 8 (Collateral) OR ☒ OTHER INFORMATION (Please Describe)

* FOR THE BENEFIT OF THE REGISTERED HOLDERS OF JPMBB COMMERCIAL MORTGAGE SECURITIES TRUST 2015-C31, COMMERCIAL MORTGAGE PASS-THROUGH CERTIFICATES, SERIES 2015-C31, AND ITS CAPACITY AS "LEAD SECURITIZATION NOTE HOLDER"

15. This FINANCING STATEMENT AMENDMENT:

☐ covers timber to be cut ☐ covers as-extracted collateral ☒ is filed as a fixture filing16. Name and address of a RECORD OWNER of real estate described in item 17
(if Debtor does not have a record interest):

Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
05/07/2025 01:25:19 PM
\$41.00 BRITTANI
20250507000138060

17. Description of real estate:

Allen S. Bevil

18. MISCELLANEOUS: