

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)

(816) 207-2125

Rebecca Wheeler102597987

B. EMAIL CONTACT AT SUBMITTER (optional)

rebecca.wheeler@alorica.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

MEDALLION BANK

4315 PICKETT RD.

ST. JOSEPH, MO 64503

FILED IN: SHELBY,AL

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. **DEBTOR'S NAME** - Provide only one Debtor name (1a or 1b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

OR

1b. INDIVIDUAL'S SURNAME

Boyd

FIRST PERSONAL NAME

Haley

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

1c. MAILING ADDRESS

1001 EAGLE NEST CIR

CITY

Birmingham

STATE

AL

POSTAL CODE

35242

COUNTRY

USA

2. **DEBTOR'S NAME** - Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S SURNAME

Boyd

FIRST PERSONAL NAME

Travis

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

2c. MAILING ADDRESS

1001 EAGLE NEST CIR

CITY

Birmingham

STATE

AL

POSTAL CODE

35242

COUNTRY

USA

3. **SECURED PARTY'S NAME** (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME

OR

3b. INDIVIDUAL'S SURNAME

MEDALLION BANK

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

3c. MAILING ADDRESS

4315 PICKETT RD.

CITY

ST. JOSEPH

STATE

MO

POSTAL CODE

64503

COUNTRY

USA

4. **COLLATERAL:** This financing statement covers the following collateral:

Inground Swimming Pool - Fixture Filing

THE FOLLOWING PROPERTY IS SITUATED IN BIRMINGHAM , COUNTY OF SHELBY , STATE OF ALABAMA
TO WIT:SUB: EAGLE POINT 17TH SECTOR M B/MP: 30/082 LOT/BLOCK: 1729/ PROPERTY ADDRESS:1001
EAGLE NEST CIR PARCEL ID#:09-3-07-0-002-002-202

TOTAL VALUE OF COLLATERAL FOR AL RECORDATION TAX IS \$65033.00

5. Check only if applicable and check only one box : Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and Instructions) ☐ being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box :

☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA:

FILING OFFICE COPY - UCC FINANCING STATEMENT (Form UCC1) (Rev.07/01/23)

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME

Boyd

FIRST PERSONAL NAME

Haley

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

10c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

USA

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

11c. MAILING ADDRESS

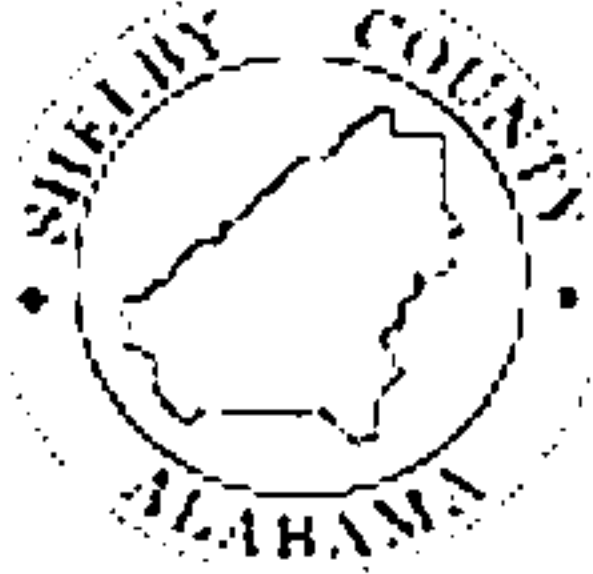
CITY

STATE

POSTAL CODE

COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
05/21/2025 02:42:21 PM
\$136.65 KELSEY
20250521000155390

Allen S. Boyd

13. ☒ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

Owners: Haley Boyd , Travis Boyd

14. This FINANCING STATEMENT:
☐ covers timber to be cut ☐ covers as-extracted collateral ☒ is filed as a fixture filing

16. Description of real estate:

THE FOLLOWING PROPERTY IS SITUATED IN
BIRMINGHAM , COUNTY OF SHELBY , STATE OF
ALABAMA TO WIT:SUB: EAGLE POINT 17TH SECTOR M
B/MP: 30/082 LOT/BLOCK: 1729/ PROPERTY
ADDRESS:1001 EAGLE NEST CIR PARCEL ID#:09-3-07-0-
002-002-202

17. MISCELLANEOUS: