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UCC FINANCING STATEMENT AWENT FOLLOW INSTRUCTIONS	JIVIENI				
A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) CSC 1-800-858-5294					
B. E-MAIL CONTACT AT SUBMITTER (optional) SPRFiling@cscglobal.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
3139 83115 CSC					
801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Alabama (Shelby)				
SEE BELOW FOR SECURED PARTY CONTACT II	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20140116000016020 01/16/2014	1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13.				
2. TERMINATION: Effectiveness of the Financing Statement identified	ed above is terminated with resp	pect to the security interest(s)	of Secured Part()	/)(ies) authorizing this Terr	nination Statement
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and a For partial assignment, complete items 7 and 9; check ASSIGN Collaboration.	-	——————————————————————————————————————			
4. CONTINUATION: Effectiveness of the Financing Statement identicational period provided by applicable law	ified above with respect to the	security interest(s) of Secured	Party authorizing	this Continuation Stateme	ent is continued for the
5. PARTY INFORMATION CHANGE:					
Check <u>one</u> of these two boxes:	D Check one of these three bo		D namo: Comple	sto itom — DELETE non	no: Civo record name
This Change affects Debtor or Secured Party of record	CHANGE name and/or a item 6a or 6b; <u>and</u> item		D name: Comple or 7b, <u>and</u> item 7	c to be deleted	ne: Give record name in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Information. 6. CURRENT RECORD INFORMATION: Complete for Party Information. 6. CURRENT RECORD INFORMATION: Complete for Party Information.		e name (6a or 6b)			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or P	Party Information Change - provide only	one name (7a or 7h) (use exact, full i	name: do not emit, me	ndify or abbroviate any part of th	o Dobtor's name)
7a. ORGANIZATION'S NAME	arry milomidillom oridings provide oring	ONO Hame (Fa of Fb) (abo oxaot, fair i	Tamo, do not omit, me	diff, or abbroviate any part of the	
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
INIDIVIDUALIO ADDITIONIAL NIABATIONIALION					loueen/
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)					SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Check only one box:	ADD collateral	DELETE collateral	RESTATE c	overed collateral	ASSIGN* collatera
Indicate collateral:	*Check ASSIGN COLLATERAL of	only if the assignee's power to amend	the record is limited t	o certain collateral and describe	the collateral in Section 8
		d Recorded Public Records			
	Judge o Clerk	f Probate, Shelby County Al	abama, County		
	Shelby (County, AL			
	\$.00 BR	D25 11:25:32 AM ATTANI	G n	· 1	
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9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and			(name of Assigno	or, if this is an Assignment)
9a. ORGANIZATION'S NAME FIRST PARTNERS	provide name of authorizing D	eptor			
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	IAI NIANAE	LADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
30. INDIVIDUAL 3 SURINAIVIE	FIRST PERSON	IZE INMIVIE	טוווט	TACE INCIDENTIAL(O)	JUFFIX
10. OPTIONAL FILER REFERENCE DATA: 400263800	I e e e e e e e e e e e e e e e e e e e		•		3139 831