



20250819000253590
08/19/2025 08:45:42 AM
UCCCONT 1/1

UCC FINANCING STATEMENT AMENDMENT
FOLLOW INSTRUCTIONS

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) 3208 34408 CSC 801 Adlai Stevenson Drive Springfield, IL 62703 Filed In: Alabama (Shelby)																					
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION			THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY																		
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20210115000026190 1/15/2021			1b. ☐ 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. ☐ 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. ☐ 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. ☒ 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. PARTY INFORMATION CHANGE: Check <u>one</u> of these two boxes: ☐ Debtor <u>or</u> ☐ Secured Party of record <u>AND</u> Check <u>one</u> of these three boxes to: ☐ CHANGE name and/or address: Complete item 6a or 6b; <u>and</u> item 7a or 7b <u>and</u> item 7c ☐ ADD name: Complete item 7a or 7b, <u>and</u> item 7c ☐ 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 colspan="4">6b. INDIVIDUAL'S SURNAME Jones</td></tr><tr><td></td><td colspan="2">FIRST PERSONAL NAME Gregory</td><td>ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr></table>					OR	6a. ORGANIZATION'S NAME				6b. INDIVIDUAL'S SURNAME Jones					FIRST PERSONAL NAME Gregory		ADDITIONAL NAME(S)/INITIAL(S)	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)																					
<table><tr><td rowspan="4">OR</td><td colspan="4">7a. ORGANIZATION'S NAME</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="3">INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)</td><td>SUFFIX</td></tr></table>					OR	7a. ORGANIZATION'S NAME				7b. INDIVIDUAL'S SURNAME				INDIVIDUAL'S FIRST PERSONAL NAME				INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX
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7c. MAILING ADDRESS																					
<table><tr><td>CITY</td><td>STATE</td><td>POSTAL CODE</td><td>COUNTRY</td></tr></table>					CITY	STATE	POSTAL CODE	COUNTRY													
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8. COLLATERAL CHANGE: Check only <u>one</u> box: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN* collateral Indicate 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																					
 Filed and Recorded Official Public Records Judge of Probate, Shelby County Alabama, County Clerk Shelby County, AL 08/19/2025 08:45:42 AM \$39.00 JOANN 20250819000253590 Allen S. Bayl																					
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 ☐ and provide name of authorizing Debtor																					
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10. OPTIONAL FILER REFERENCE DATA: BillingRef2 :Gregory Jones - 45198																					
3208 34408																					