

UCC FINANCING STATEMENT  
FOLLOW INSTRUCTIONS

20251007000309160 1/3 \$28.00  
Shelby Cnty Judge of Probate, AL  
10/07/2025 11:22:13 AM FILED/CERT

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)  
Edwards, Gary-F 205-532-0765

B. E-MAIL CONTACT AT SUBMITTER (optional)  
motodoc1@gkedwards.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

GARY FORREST EDWARDS  
PO BOX 563

ALABASTER, AL 35007  
USA

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

Alabama  
Sec. Of State

B 25-7461301 FS  
Date 08/12/2025  
Time 08:41 PM  
250812 3 Pg

File \$15.00  
Access \$9.75  
Conv \$5.50  
Total \$30.25

111432778

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  
EDWARDS

FIRST PERSONAL NAME  
GARY

ADDITIONAL NAME(S)/INITIAL(S)  
FORREST

SUFFIX

1c. MAILING ADDRESS  
PO BOX 563

CITY  
ALABASTER

STATE  
AL

POSTAL CODE  
35007

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

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

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  
Edwards

FIRST PERSONAL NAME  
Gary-

ADDITIONAL NAME(S)/INITIAL(S)  
Forrest:

SUFFIX

3c. MAILING ADDRESS  
158 Big Oak Drive NON COMMERCIAL SITUS

CITY  
Maylene

STATE  
AL

POSTAL CODE  
35114-9778

COUNTRY  
USA

4. COLLATERAL: This financing statement covers the following collateral:  
DEBTOR (secundum legem/ens legis) transfers/delivers/entrusts/commits/bequeaths to SECURED PARTY (secundum naturam/jus naturale) all property, including but not limited to:

- 1) Every species of valuable right(s) & interest(s) (legal, beneficial, and otherwise; whether absolute or qualified; corporeal or incorporeal, tangible, or intangible, visible or invisible, real/immovable or personal/moveable, that is/are subject to DEBTOR's actual or constructive ownership/possession/control, and has exchange value or makes up wealth or estate(public & private).
- 2) Any politically, commercially &/or legally granted or conferred rights/privileges/benefits/powers/immunities, without prejudice and without recourse to SECURED PARTY.
- 3) All signature rights as DEBTOR's "Authorized Representative", "Unambiguously Authorized Agent", "Attorney in fact", "Guarantor" (SEE ADDENDUM)

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:



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# UCC FINANCING STATEMENT ADDENDUM

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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

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

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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

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

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12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

3) (Cont) "Guarantor" having mere indirect & collateral interest in the object(s) regarding alleged, claimed or confirmed debt(s)/duty(ies)/liability(ies)/obligation(s), and having no part, active concern, or direct interest in any action, proceeding or subject matter.

4) State of Alabama Center for Health Statistics "CERTIFICATE OF LIVE BIRTH" issued in DEBTOR's name as "CHILD'S NAME", Local Registration # 101-59-038302 Rec 8.04.1959,  
SEE ADDENDUM #2

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

14. This FINANCING STATEMENT:

☐ covers timber to be cut

☐ covers as-extracted collateral

☐ is filed as a fixture filing

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

16. Description of real estate:

17. MISCELLANEOUS:





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OR	10a. ORGANIZATION'S NAME			
	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
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11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

OR	11a. ORGANIZATION'S NAME			
	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

11c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

5) (Cont) Local Registration Certificate NO -101-59-038302., along with any and all prior and subsequent-accrued profits, proceeds and accounts, inclusive but not limited to SSA an dothers to be discovered.

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

14. This FINANCING STATEMENT:

☐ covers timber to be cut ☐ covers as-extracted collateral ☐ is filed as a fixture filing

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

16. Description of real estate:

17. MISCELLANEOUS: