20251023000325540 10/23/2025 01:00:32 PM UCCCONT 1/1

UCC FINANCING STATEMENT AMEND FOLLOW INSTRUCTIONS	MENT				
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)					
4583 992	Filed In: AL County Probate Court				
SEE BELOW FOR SECURED PARTY CONTACT INFORMATION		THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY			DNLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20101119000390430 11/19/2010		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	d above is terminated with resp	ect to the security interest(s	s) of Secured Part(y)((ies) authorizing this Termina	tion Statement
3. ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and action for partial assignment, complete items 7 and 9; check ASSIGN Collater					
4. CONTINUATION: Effectiveness of the Financing Statement identification additional period provided by applicable law	ied above with respect to the s	ecurity interest(s) of Secure	ed Party authorizing t	his Continuation Statement is	s continued for the
5. PARTY INFORMATION CHANGE:					
Check one of these two boxes:	Check <u>one</u> of these three box	ddress: Complete ——A		e itemDELETE name:	
This Change affects Debtor or Secured Party of record 6. CURRENT RECORD INFORMATION: Complete for Party Information	item 6a or 6b; <u>and</u> item 7 tion Change - provide only <u>one</u>		a or 7b, <u>and</u> item 7c	to be deleted in it	tem 6a or 6b
6a. ORGANIZATION'S NAME Valleydale Office	Plaza, LLC				
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Pa	rty Information Change - provide only	one name (7a or 7b) (use exact, fu	ıll name; do not omit, modi	ify, or abbreviate any part of the Del	otor's name)
7a. ORGANIZATION'S NAME					
OR 7b. INDIVIDUAL'S SURNAME					
INDIVIDUAL'S FIRST PERSONAL NAME					
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 cov	vered collateral	SSIGN* collateral
Indicate collateral:		Filed a Officia Judge Clerk Shelby 10/23/ \$39.00	and Recorded al Public Records of Probate, Shelby (County Alabama, County	اند العلامة ا
- NAME - OFOURTS SAST - SECOND	— 111.— • • • • • • • • • • • • • • • • • • •				- J. Cryc
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and	provide name of authorizing D		b) (name of Assignor,	, if this is an Assignment)	
9a. ORGANIZATION'S NAME OAKWORTH CAPITAL B	BANK				
OR 9b. INDIVIDUAL'S SURNAME	FIRST PERSON	AL NAME	ADDITION	AL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Valleydale	Office #8600			4583	992