

NCS-2B7QAL01

20251029000331430 10/29/2025 11:30:50 AM UCC6 1/2

## UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) B. EMAIL CONTACT AT SUBMITTER (optional) C. SEND ACKNOWLEDGMENT TO: (Name and Address). Zachary D. Imboden, Esquire Troutman Pepper Locke LLP Post Office Box 1122 Richmond, Virginia 23218 SEE BELOW FOR SECURED PARTY CONTACT INFORMATION THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1a. INITIAL FINANCING STATEMENT FILE NUMBER This FINANCING STATEMENT AMENDMENT is to be filed [for 1b, 🗹 20210511000232150 record] (or recorded) in the REAL ESTATE RECORDS. filed 05/11/2021 Filer: attach Amendment Addendum (form UCC3Ad) and 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 ASSIGNMENT: Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and 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 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 PARTY INFORMATION CHANGE: Check one of these two boxes: AND Check one of these three boxes to: CHANGE name and/or address: Complete | ADD name: Complete item DELETE name: Give record name: This Change affects Debtor or Decured Party of record item 6a or 6b; and item 7a or 7b and item 7c 7a or 7b, and item 7c to be deleted in item 6a or 6b 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b) 6a. ORGANIZATION'S NAME 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX 7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) 7a, ORGANIZATION'S NAME 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 COLLATERAL CHANGE: LI ADD collateral DELETE collateral RESTATE covered collateral Check only one box: ASSIGN\* collateral \*Check ASSIGN COLLATERAL only if the assignee's power to amend the record is limited to a certain collateral and describe the collateral in Section & Indicate Collateral: 9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one 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 9a. ORGANIZATION'S NAME FANNIE MAE 9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

FILING OFFICE COPY — UCC FINANCING STATEMENT AMENDMENT (Form UCC3) (Rev. 07/01/23)

Longmeadow Mobile Home Park (Assumption) (Local – Shelby County, Alabama)

10. OPTIONAL FILER REFERENCE DATA:

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS							
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 20210511000232150 filed 05/11/2021							
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form							
	FANNIE MAE						
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OR 1	12b. INDIVIDUAL'S SURNAME						
	FIRST PERSONAL NAME			W-218 - 1111 - 1111 - 1			
	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX				
13. Name of DEBTOR on related financing statement (Name of a current Debtor of record requi				ing purpo	oses only in so	E SPACE IS FOR FILING OFFICE USE me filing offices – see Instruction item 13):	
one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit  13a. ORGANIZATION'S NAME							
1 134C	LONGMEADOW FMHC, L 36. INDIVIDUAL'S SURNAME	LC	TIMOT DESCON	141 2122			
•	OD. HADIVEDOME O SOINIMAINE		FIRST PERSON	VAL NAN	V1 i∷:	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
14. ADDITIONAL SPACE FOR (CHECK ONE BOX): TEM 8 (Collateral)				OTHE	R INFORMATI	ION (Please Describe)	
Filed and Recorded Official Public Records Judge of Probate, Shelby Clerk Shelby County, AL 10/29/2025 11:30:50 AM \$.00 KELSEY 20251029000331430						alli 5. Beyl	
covers timber to be cut  covers as-extracted collateral  is filed as a fixture filing				olion of n	eal estate:		
16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):							
18. MIS€	CELLANEOUS:						