



20251226000394250 1/2 \$.00
Shelby Cnty Judge of Probate, AL
12/26/2025 12:02:21 PM FILED/CERT

Record at the request of and
when recorded return to:
GoodLeap, LLC

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)				
B. E-MAIL CONTACT AT SUBMITTER (optional) filings@goodleapsupport.com				
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"><div>GoodLeap, LLC</div><div>PO Box # 981440</div><div>El Paso, TX 79998- 1440</div></div> <div style="text-align: center; margin-top: 10px;">SEE BELOW FOR SECURED PARTY CONTACT INFORMATION</div>				
1a. INITIAL FINANCING STATEMENT FILE NUMBER 11/22/2024 20241122000362640 Shelby, AL			1b. <input checked="" type="checkbox"/> 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. <input checked="" type="checkbox"/> 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. <input type="checkbox"/> 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				
4. <input type="checkbox"/> 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: <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record AND Check <u>one</u> of these three boxes to: <div style="display: flex; justify-content: space-between; font-size: small;"><div>This Change affects <input type="checkbox"/> CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c</div><div><input type="checkbox"/> ADD name: Complete item 7a or 7b, and item 7c</div><div><input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b</div></div>				
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only <u>one</u> name (6a or 6b)				
<div style="border: 1px solid black; padding: 2px;"><div>6a. ORGANIZATION'S NAME</div><div style="height: 20px;"></div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;">OR<div style="border: 1px solid black; padding: 2px;"><div>6b. INDIVIDUAL'S SURNAME</div><div>Howald</div></div><div style="border: 1px solid black; padding: 2px;"><div>FIRST PERSONAL NAME</div><div>Ruth</div></div><div style="border: 1px solid black; padding: 2px;"><div>ADDITIONAL NAME(S)/INITIAL(S)</div><div></div></div><div style="border: 1px solid black; padding: 2px;"><div>SUFFIX</div><div></div></div></div>				
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)				
<div style="border: 1px solid black; padding: 2px;"><div>7a. ORGANIZATION'S NAME</div><div style="height: 20px;"></div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;">OR<div style="border: 1px solid black; padding: 2px;"><div>7b. INDIVIDUAL'S SURNAME</div><div></div></div><div style="border: 1px solid black; padding: 2px;"><div>INDIVIDUAL'S FIRST PERSONAL NAME</div><div></div></div><div style="border: 1px solid black; padding: 2px;"><div>INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)</div><div></div></div><div style="border: 1px solid black; padding: 2px;"><div>SUFFIX</div><div></div></div></div>				
7c. MAILING ADDRESS				
8. COLLATERAL CHANGE: Check only <u>one</u> box: <input type="checkbox"/> ADD collateral <input type="checkbox"/> DELETE collateral <input type="checkbox"/> RESTATE covered collateral <input type="checkbox"/> ASSIGN* collateral <div style="font-size: x-small; margin-top: 5px;">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</div>				
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 <input type="checkbox"/> and provide name of authorizing Debtor				
<div style="border: 1px solid black; padding: 2px;"><div>9a. ORGANIZATION'S NAME</div><div>GoodLeap, LLC</div></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;">OR<div style="border: 1px solid black; padding: 2px;"><div>9b. INDIVIDUAL'S SURNAME</div><div></div></div><div style="border: 1px solid black; padding: 2px;"><div>FIRST PERSONAL NAME</div><div></div></div><div style="border: 1px solid black; padding: 2px;"><div>ADDITIONAL NAME(S)/INITIAL(S)</div><div></div></div><div style="border: 1px solid black; padding: 2px;"><div>SUFFIX</div><div></div></div></div>				
10. OPTIONAL FILER REFERENCE DATA: 2415217543 FIXTERM Ruth Howald Shelby				



20251226000394250 2/2 \$.00
Shelby Cnty Judge of Probate, AL
12/26/2025 12:02:21 PM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT ADDENDUM
FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 11/22/2024 20241122000362640 Shelby, AL	
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form	
OR	12a. ORGANIZATION'S NAME GoodLeap, LLC
	12b. INDIVIDUAL'S SURNAME
	FIRST PERSONAL NAME
ADDITIONAL NAME(S)/INITIAL(S)	
SUFFIX	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only 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			
OR	13a. ORGANIZATION'S NAME		
	13b. INDIVIDUAL'S SURNAME Howald	FIRST PERSONAL NAME Ruth	ADDITIONAL NAME(S)/INITIAL(S)
SUFFIX			

14. ADDITIONAL SPACE FOR (CHECK ONE BOX): ☐ ITEM 8 (Collateral) OR ☐ OTHER INFORMATION (Please Describe)

15. This FINANCING STATEMENT AMENDMENT: <input type="checkbox"/> covers timber to be cut <input type="checkbox"/> covers as-extracted collateral <input checked="" type="checkbox"/> is filed as a fixture filing	17. Description of real estate: 136 SPRING RD, Birmingham, AL 35242 COUNTY Shelby APN 106230003023000 SEC/TWNSHP/RAN 23 19S 02W NBRHD: 08 SUMMERPLACE R-2
16. Name and address of a RECORD OWNER of real estate described in item 17 (If Debtor does not have a record interest): Ruth Howald	
18. MISCELLANEOUS: FIXTERM	