



UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional) FCC Finance, LLC, Customer Service (214) 488-3200	
B. E-MAIL CONTACT AT SUBMITTER (optional) CSR@FCCFinance.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address) <div>FCC FINANCE, LLC P.O. BOX 250489 PLANO, TX 75025-0489</div> <div>SEE BELOW FOR SECURED PARTY CONTACT INFORMATION</div>	

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 ft 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)

OR	1a. ORGANIZATION'S NAME					
	1b. INDIVIDUAL'S SURNAME GARNER					
OR	1c. MAILING ADDRESS 190 HONEYSUCKLE CIRCLE		CITY HELENA	STATE AL	POSTAL CODE 35080	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 ft 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)

OR	2a. ORGANIZATION'S NAME					
	2b. INDIVIDUAL'S SURNAME					
OR	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)

OR	3a. ORGANIZATION'S NAME CH TLC Peak, LLC					
	3b. INDIVIDUAL'S SURNAME					
OR	3c. MAILING ADDRESS P.O. BOX 250489		CITY PLANO	STATE TX	POSTAL CODE 75025-0489	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

ALL MATERIALS AND ACCESSORIES NECESSARY TO COMPLETE HVAC INSTALLATION PROJECT.
COMPLETED BY ETHRIDGE HEATING AND AIR INC.

ORIGINAL LOAN AMOUNT: \$ 6,507.00

5. Check <u>only</u> if applicable and check <u>only</u> one box: Collateral is <input checked="" type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing	
6b. Check <u>only</u> if applicable and check <u>only</u> one box: <input type="checkbox"/> Licensee/Licensors	
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor	
8. OPTIONAL FILER REFERENCE DATA: 58200361803	

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

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 <input type="checkbox"/>	
9a. ORGANIZATION'S NAME	
OR	9b. INDIVIDUAL'S SURNAME
	GARNER
	FIRST PERSONAL NAME
SHIRLEY	
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only <u>one</u> 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					
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

11. <input type="checkbox"/> ADDITIONAL SECURED PARTY'S NAME <u>or</u> <input type="checkbox"/> ASSIGNOR SECURED PARTY'S NAME: Provide only <u>one</u> 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

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)	14. This FINANCING STATEMENT: <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
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: PLEASE SEE ATTACHED LEGAL DESCRIPTION

17. MISCELLANEOUS:

UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS

11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form

12a. ORGANIZATION'S NAME
CH TLC Peak, LLC

OR

12b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)SUFFIX

Print

Reset

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

13a. ORGANIZATION'S NAME

OR

13b. INDIVIDUAL'S SURNAME
GARNER

FIRST PERSONAL NAME
SHIRLEY

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):

SHIRLEY GARNER, DECEDENT PASSED AWAY ON NOVEMBER 20, 2021.

15. This FINANCING STATEMENT AMENDMENT:

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

16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):

17. Description of real estate:

PLEASE SEE ATTACHED LEGAL DESCRIPTION

18. MISCELLANEOUS:

UCC FINANCING STATEMENT AMENDMENT ADDENDUM (Form UCC3Ad) (Rev. 04/20/11)

FDI #: 1434255-1

REF #: 58200361803

LEGAL DESCRIPTION :

The following described real estate situated in SHELBY County, Alabama to-wit:

Commence at the NE corner of the NE1/4 of the SE1/4 of Section 26, Township 20 South, Range 4 West; thence run south along said 1/4-1/4 line a distance of 765.15 feet; thence turn an angle of 89°29'37" right and run a distance of 221.00 feet to the Point of Beginning; thence continue along last described course a distance of 148.0 feet; thence turn an angle of 90° left and run a distance of 105.0 feet; thence turn an angle of 90° and run a distance of 148.0 feet; thence turn an angle of 90° and run a distance of 105.0 feet to the Point of Beginning, containing 0.36 acres, more or less.

Parcel No.: 14 7 26 0 000 029.001

BEING the same premises which Grady J. Garner and wife, Shirley Ann Garner, by deed dated 12/11/1998 and recorded 12/14/1998 in the Recorder's Office of Shelby County in Deed, as Instrument No. 1998-49691, granted and conveyed unto Jason W. Garner and Agnes V. Millron, for and during their joint lives as joint tenants and upon the death of either of the, then to the survivor of them in fee simple.



Filed and Recorded
Official Public Records
Judge of Probate, Shelby County Alabama, County
Clerk
Shelby County, AL
01/06/2026 08:14:53 AM
\$52.90 KELSEY
20260106000003520

Allen S. Bayl

THE INFORMATION CONTAINED WITHIN THIS REPORT IS NOT TO BE CONSIDERED AN EXAMINATION, CERTIFICATION OR REPRESENTATION OF FACT OR TITLE AND DOES NOT CREATE AND SHALL NOT BE THE BASIS OF ANY CLAIM FOR NEGLIGENCE, NEGLIGENT MISREPRESENTATION OR OTHER TORT CLAIM OR ACTION. MOREOVER, THIS REPORT DOES NOT EXPLAIN THE LEGAL STATUS OF TITLE TO REAL ESTATE, THE LEGAL EFFECT OF ANYTHING FOUND WITHIN THE CHAIN OF TITLE OR THE LEGAL EFFECTS OF OTHER MATTERS FOUND OF RECORD THAT COULD AFFECT THE MARKETABILITY OF TITLE.

THE SOLE LIABILITY OF FINANCIAL DIMENSIONS, INC. TO ANY PARTY FOR LOSS(ES) SUSTAINED BY RELIANCE UPON THE INFORMATION PROVIDED WITHIN THIS REPORT SHALL BE LIMITED TO THOSE AMOUNTS PAID FOR SAID REPORT.

Thank you for selecting Financial Dimensions, Inc.!

Financial Dimensions, Inc.
 7025 Clairton Rd
 West Mifflin, PA 15122
 1-800-858-9808