		N.L.II		
		#### 20	11111111111111111111111111111111111111	102
UCC FINANCING STATEMENT AMENDIFOLLOWINSTRUCTIONS	MENT	FOR PRESE	SYTH CO, NC FEE \$38.00 NTED & RECORDED: 24-2018 02:20:04 Pt	
A. NAME & PHONE OF CONTACT AT FILER (optional) HEATHER QUESINBERRY 336-835-3607		REGIST	NE JOHNSON IER OF DEEDS IMA DOYLE	
B. E-MAIL CONTACT AT FILER (optional) HEATHER@GBENERGY.COM	<del> </del>		K: RE 3400	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)		PG PG	6: 4382-4383	
G & B ENERGY PO BOX 811 ELKIN, NC 28621	I			
上		THE AROVE SPA	ACE IS FOR FILING OFFICE USE	ONLY
1a. INITIAL FINANCING STATEMENT FILE NUMBER BK:RE 3397 PG 3443-3444		1b. This FINANCING STATE	MENT AMENDMENT is to be filed (fo	r record]
TERMINATION: Effectiveness of the Financing Statement identi Statement	ified above is terminated v			
ASSIGNMENT (full or partial): Provide name of Assignee in iter     For partial assignment, complete items 7 and 9 <u>and</u> also indicate a			of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement ide continued for the additional period provided by applicable law	antified above with respect	to the security interest(s) of Sec	cured Party authorizing this Continua	tion Statement is
5. PARTY INFORMATION CHANGE:  Check one of these two boxes:  This Change affects Debtor or Secured Party of record  5. CURRENT RECORD INFORMATION: Complete for Party Informa  [6a. ORGANIZATION'S NAME	Check one of these three by CHANGE name and/or a item 6a or 6b; and item 6 ation Change - provide only	ddress: Complete 'a or 7b <u>and</u> item 7c	ne: Complete itemDELETE name and item 7cto be deleted in	Give record nar
OR 66. INDIVIDUAL'S SURNAME BERRY	FIRST PERSON		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
CHANGED OR ADDED INFORMATION: Complete for Assignment or Pa     Ta. ORGANIZATION'S NAME			ame; do not omit, modify, or abbreviate any part	of the Debtor's name
OR 7b. INDIVIDUAL'S SURNAME				···
			, <u>, , , , , , , , , , , , , , , , , , </u>	
INDIVIDUAL'S FIRST PERSONAL NAME	<del> </del>			
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				SUFFIX
7c. MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTRY
PARCEL ID 6388-25-0185,00 BLOCK LOT 5423B001 MAP NUMBER 678882 Physical Address 8505 SHEPPARDS RUN DR KERNERESVILLE,	nber 814345 Total lien wa MINATI	s requested	FIXTURES	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING If this is an Amendment authorized by a DEBTOR, check here and 9a. ORGANIZATION'S NAME G AND B OIL COMPANY INCORPORA	provide name of authorizin		name of Assignor, if this is an Assignm	ent)
OR 96. INDIVIDUAL'S SURNAME	FIRST PERSON.	AL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

	IITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a or RE 3397 PG 3443-3444	n Amendment form				
. N	AME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item	9 on Amendment form				
- 1	28. ORGANIZATIÓN'S NAME G AND B OIL COMPANY INCORPORATED					
٦						
֓֟֟֝֟֓֓֓֓֓֓֓֓֓֓֓֓֓֟֟֓֓֓֟֓֓֓֓֓֓֓֓֓֓֟֓֓֓֓֟֓֓֓֓	2b. INDIVIDUAL'S SURNAME					
	FIRST PERSONAL NAME					
	ADDITIONAL NAME(S)/INITIAL(S)	SUFF	ΊΧ	THE ABOVE	SPACE IS FOR FILING OFFICE	USE ONLY
	ame of DEBTOR on related financing statement (Name of a current D ne Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or ab					n 13): Provid
	3a, ORGANIZATION'S NAMÉ				· · · · · ·	
t	3b. INDIVIDUAL'S SURNAME BERRY	FIRST PERSONAL NATHANI			ADDITIONAL NAME(S)/INITIAL(S)	SÚFFIX
Th	IS FINANCING STATEMENT AMENDMENT:	17.	Description	of real estate:		