



UNIFORM COMMERCIAL CODE—FINANCING STATEMENT CHANGE—FORM N-UCC-2 STATE OF NEVADA
IMPORTANT—Read instructions on back before filling out form

FINANCIAL FORMS DEPARTMENT
DIAMOND INTERNATIONAL CORPORATION
P.O. BOX 4000 - RENO, NEVADA 89505

This STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

1. FILE NO. OF ORIG. FINANCING STATEMENT 05207	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT 5-11-82	1B. DATE OF ORIG. FINANCING STATEMENT 5-4-82	1C. PLACE OF FILING ORIG. FINANCING STATEMENT Douglas County
2. DEBTOR (LAST NAME FIRST) CLASON ENTERPRISES, INCORPORATED			2A. SOCIAL SECURITY OR FEDERAL TAX NO. 88-0165966
2B. MAILING ADDRESS BOX 12089		2C. CITY, STATE ZEPHYR COVE, NEVADA	2D. ZIP CODE 89448
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)			3A. SOCIAL SECURITY OR FEDERAL TAX NO.
3B. MAILING ADDRESS		3C. CITY STATE	3D. ZIP CODE
4. SECURED PARTY NAME FIRST INTERSTATE BANK OF NEVADA, N.A. MAILING ADDRESS BOX 5430 CITY STATELINE STATE NEVADA ZIP CODE 89449			4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO. 94-78 / 1212
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE			5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
6. A <input type="checkbox"/> CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, fixtures, or oil, gas or minerals check here <input type="checkbox"/> and insert description of real property on which growing or to be grown or to which affixed or to be affixed or from which to be extracted in Item 7 below. If crops or fixtures, also insert name of record owner of real estate. Effective if submitted within 6 months of expiration date.			
B <input type="checkbox"/> RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 7 below. Release does not terminate debt.			
C <input type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.			
D <input checked="" type="checkbox"/> TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above.			
E <input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor and Secured Party required on all amendments.)			
F <input type="checkbox"/> OTHER (May be used for change of address.)			

THIS SPACE FOR USE OF FILING OFFICER

7.

8. (Date) September 10, 1984

By: _____
SIGNATURE(S) OF DEBTOR(S) (TITLE)
FIRST INTERSTATE BANK OF NEVADA, N.A.

By: [Signature]
SIGNATURE(S) OF SECURED PARTY(IES) L. Etter, Assistant Mgr.

9. This Space for Use of Filing Officer
(Date, Time, Filing Office)

REQUESTED BY
First Interstate Bank
IN OFFICIAL RECORDS OF
DOUGLAS COUNTY, NEVADA

'84 SEP 12 10:51

SUZAINNE BEAUDREAU
RECORDER

\$ 4.00 PAID JL DEPUTY
BOOK 984 PAGE 930
106558
FILING FEE
SEE INSTRUCTIONS

10. Return Copy to

NAME FIRST INTERSTATE BANK OF NEVADA
ADDRESS P. O. BOX 5430
CITY, STATE STATELINE, NEVADA 89449
AND ZIP