

IMPORTANT—Read instructions on back before filling out form

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

1. FILE NO. OF ORIG. FINANCING STATEMENT 231801	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT AUG. 8, 1990	1B. DATE OF ORIG. FINANCING STATEMENT JULY 30, 1990	1C. PLACE OF FILING ORIG. FINANCING STATEMENT CARSON CITY, NEVADA
2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) WELLS, ALLAN KENT			2A. SOCIAL SECURITY OR FEDERAL TAX NO.
2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) 183 JUNIPER DRIVE		2C. CITY, STATE STATELINE, NEVADA	2D. ZIP CODE 89449
3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) WELLS, JANET DAIL			3A. SOCIAL SECURITY OR FEDERAL TAX NO.
3B. MAILING ADDRESS 183 JUNIPER DRIVE		3C. CITY, STATE STATELINE, NV.	3D. ZIP CODE 89449
4. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)			4A. SOCIAL SECURITY OR FEDERAL TAX NO.
4B. MAILING ADDRESS		4C. CITY, STATE	4D. ZIP CODE
5. SECURED PARTY NAME SECURITY PACIFIC BANK NEVADA MAILING ADDRESS P.O. BOX 18415 CITY LAS VEGAS STATE NV. ZIP CODE 89114			5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO. 94-15
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE			6A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
7. 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 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted within 6 months prior to 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 8 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 or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 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 8 below. (Signature of Debtor(s) and Secured Party(ies) required on all amendments)			
8.			

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) NOVEMBER 5, 1990 19__

By: _____ (TITLE)

SIGNATURE(S) OF DEBTOR(S)

By: _____ (TITLE)

SIGNATURE(S) OF SECURED PARTY(IES)

RICHARD YACH, VICE PRESIDENT
SECURITY PACIFIC BANK NEVADA

TYPE NAME(S)

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

REQUESTED BY
PACIFIC TITLE, INC.
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

11. **Return Copy to**

NAME SECURITY PACIFIC BANK NEVADA
ADDRESS REAL ESTATE INDUSTRIES GROUP
CITY, STATE P.O. BOX 18415
AND ZIP LAS VEGAS, NV 89114

'90 NOV 27 10:29

SUZANNE BEAUDREAU
RECORDER

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