

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

1. FILE NO. OF ORIG. FINANCING STATEMENT 165549	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT November 2, 1987	1B. DATE OF ORIG. FINANCING STATEMENT October 28, 1987	1C. PLACE OF FILING ORIG. FINANCING STATEMENT Douglas County Recorder
2. DEBTOR (LAST NAME FIRST) DRANGE, STUART, DDS, APC		2A. SOCIAL SECURITY OR FEDERAL TAX NO. 88-0177179	
2B. MAILING ADDRESS P. O. Box 1398		2C. CITY, STATE Minden, Nevada	2D. ZIP CODE 89423
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 P. O. Box 68 CITY Minden STATE NV ZIP CODE 89423			4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO. 94-41/1212
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.)			

7.

8. (Date) December 18, 1990
 STUART DRANGE, DDS, APC
 By: [Signature] President
 Stuart Drange, OF DEBTOR President (TITLE)
 FIRST INTERSTATE BANK OF NEVADA, N.A.
 By: [Signature] VP & Manager
 R. C. Chambers, OF SECURED PARTY (IES) (TITLE)

9. This Space for Use of Filing Officer (Date, Time, Filing Office)
 REQUESTED BY
 FIB
 IN OFFICIAL RECORDS OF
 DOUGLAS CO., NEVADA

10. Return Copy to
 NAME First Interstate Bank of Nevada, N.A.
 ADDRESS P. O. Box 68
 CITY, STATE AND ZIP Minden, Nv. 89423

90 DEC 19 10:19
 SUZANNE BEAUDREAU
 RECORDER 241252
 \$10.00 PAID KR DEPUTY
 BOOK 1290 PAGE 2414
 FILING FEE SEE INSTRUCTIONS

THIS SPACE FOR USE OF FILING OFFICER