

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

1. FILE NO. OF ORIG. FINANCING STATEMENT <b>147863</b>	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT <b>01/05/87</b>	1B. DATE OF ORIG. FINANCING STATEMENT	1C. PLACE OF FILING ORIG. FINANCING STATEMENT <b>Douglas County, NV</b>
2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>Ristuben, Kenneth W.</b>		2A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>4055</b>	
2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) <b>1666 U.S. Highway 395</b>		2C. CITY, STATE <b>Minden, NV</b>	2D. ZIP CODE <b>89423</b>
3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) <b>Ristuben, Sandra</b>		3A. SOCIAL SECURITY OR FEDERAL TAX NO. <b>-8388</b>	
3B. MAILING ADDRESS <b>1666 U.S. Highway 395</b>		3C. CITY, STATE <b>Minden, NV</b>	3D. ZIP CODE <b>89423</b>
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 <b>HCFS Business Equipment Corporation</b> MAILING ADDRESS <b>2700 Sanders Road</b> CITY <b>Prospect Heights</b> STATE <b>IL</b> ZIP CODE <b>60070</b>		5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
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  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  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  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  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  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  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 area is mostly blank with a large circular stamp in the background)*

9. (Date) \_\_\_\_\_ 19\_\_\_\_

By: \_\_\_\_\_ (TITLE)  
 SIGNATURE(S) OF DEBTOR(S)  
**ROBERT WALSH, PRESIDENT**

By: *Robert Walsh* (TITLE)  
 SIGNATURE(S) OF SECURED PARTY(IES)  
**HCFS Business Equipment Corporation**

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

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**91 JAN 28 10:56**

SUZANNE BEAUDREAU  
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**11 00 PAID \$12** DEPUTY

BOOK **191** PAGE **3323**

FILING FEE SEE INSTRUCTIONS

11. Return Copy to

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CITY, STATE AND ZIP \_\_\_\_\_

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THANK YOU

Approved by the Nevada Secretary of State

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