

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

UCC-2 G79 NV

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

1. FILE NO. OF ORIG. FINANCING STATEMENT 174477	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT MAR 16, 1988	1B. DATE OF ORIG. FINANCING STATEMENT MAR. 10, 1988	1C. PLACE OF FILING ORIG. FINANCING STATEMENT DOUGLAS COUNTY
2. DEBTOR (LAST NAME FIRST) DOWN, KENNETH E.		2A. SOCIAL SECURITY OR FEDERAL TAX NO. 5264	
2B. MAILING ADDRESS PO BOX 2611		2C. CITY, STATE MINDEN, NV	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 MAILING ADDRESS CITY CARSON CITY		4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
STATE NV		ZIP CODE 89702	
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY		5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
STATE		ZIP CODE	
6. <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, check here <input type="checkbox"/> and insert description of real property on which growing or to be grown in Item 7 below.			
<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.			
<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.			
<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.			
<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 required on all amendments.)			
<input type="checkbox"/> OTHER			

THIS SPACE FOR USE OF FILING OFFICER

7.

8. (Date) FEB 22 19 91

By: _____
SIGNATURE(S) OF DEBTOR(S) (TITLE)

NORWEST FINANCIAL INC

By: NORMA STONE - CSR *Norma Stone CSR*
SIGNATURE(S) OF SECURED PARTY (IES) (TITLE)

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

REQUESTED BY
Norwest Financial
 IN OFFICIAL RECORDS OF
 DOUGLAS CO. NEVADA

91 MAR -4 P1:45

SUZANNE BLAUREAU
 RECORDER
245936
 \$10⁰⁰ PAID *KA* DEPUTY

BOOK 391 PAGE 369

10. Return Copy to

NORWEST FINANCIAL INC

NAME
 ADDRESS
 CITY, STATE
 AND ZIP

**PO BOX 2549
 CARSON CITY, NV 89702**