STATE OF NEVADA

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

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

| vw/45-34 | | | | | B #4486 |
|---|--|--|---|--|--|
| 1. FILE NO. OF ORIG FINANCING STATEMENT | 1A. DATE OF FILING OF ORIG FINANCING | 1 | TE OF ORIG FINANCING STA | | ING ORIG FINANCING STATEMENT |
| 2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) | | | 1, 13, 1990 | DOUGLAS COUNTY, NV 2A. SOCIAL SECURITY OF FEDERAL TAX NO | |
| XX LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST) DOB'S TIRE AND AUTO CENTERS | | | | 95-3065 | |
| 28. MAILING ADDRESS IAS APPEARS ON ORIGINAL | | | 2C. CITY, STATE | CALTEODNIA | 2D. ZIP CODE |
| 3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONL | | | VENTURA, | CALIFORNIA 3A. SOCIAL SECU | 93003 RITY OR FEDERAL TAX NO |
| LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST) | | | | _ \ \ | |
| 3B. MAILING ADDRESS | | | 3C. CITY, STATE | \ \ | 3D. ZIP CODE |
| 4. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONL) LEGAL BUSINESS NAME | r) | | | 4A. SOCIAL SECU | RITY OR FEDERAL TAX NO |
| INDIVIDUAL (LAST NAME FIRST) 4B. MAILING ADDRESS | | | 4C. CITY, STATE | | 4D. ZIP CODE |
| | & CAPITAL CORPORAT CADERO CENTER ISCO C | ION ALIFORNIA | žiP CODE | 5A. SOCIAL SEEU TRANSIT AND 194–16 | |
| 6. ASSIGNEE OF SECURED PARTY (IF ANY) | | / / | 1 | 6A. SOCIAL SECU TRANSIT AND | RITY NO , FED. TAX NO OR BANK |
| NAME | | |) | Treatist And | A DA NO |
| MAILING ADDRESS | STATE | | ZIP CODE | | ł |
| above is continued. If growing or to be grow record owner of real | e original Financing Statemen collateral is crops or timber, fin n or to which affixed or to be all estate. Effective only if | xtures, or oil, gas o liixed or from whic submitted wi | r minerals check her h to be extracted in thin 6 months | e 🗌 and insert description o Item 8 below. If crops or fixtu prior to expiration da | f real property on which Ires, also insert name of te. |
| RELEASE—From the collateral described in | collateral described in the Fin 1 Item 8 below. Re | | bearing the file nu ot terminate de | | ured Party releases the |
| C Party's rights under t | Secured Party certifies that the Financing Statement beari Secured Party certifies that the | ng the file numbe | r shown above in th | ne collateral described in Ite | m 8 below. |
| D X the file number show | n above. | | | • | |
| (Signature of De | inancing Statement bearing to abtor(s) and Secured P | | | | |
| 8. | | | | | |
| 9. By: SIGNATURE(SLOPT DEDYOR(S) | (Date) | SEPT. 12, | 19 ⁹¹ | 10. This Space for Use of Filing O | fficer (Date, Time, Filing Office) |
| By: BA LEASING & CAP | | ASST. TR | EASURER | Dobs Times To Brown Head To Bound As Co. A | c 3/0/ E |
| BA LEASING & CA | . WRIGHT | | | 91 OCT -3 AN SUZ -191 BLA SUZ - | MOREAU ER 261716 |