

UNIFORM COMMERCIAL CODE—FINANCING STATEMENT CHANGE—FORM N-UCC-2 STATE OF NEVADA  
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 177769		1A. DATE OF FRING OF ORIG. FINANCING STATEMENT 05-10-88		1B. DATE OF ORIG. FINANCING STATEMENT 05-03-88		1C. PLACE OF FRING ORIG. FINANCING STATEMENT DOUGLAS COUNTY, NV	
2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) BLACK CHIROPRACTIC						2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) PO BOX 2259-306				2C. CITY, STATE MINDEN, NEVADA		2D. ZIP CODE 89423	
3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)						3A. SOCIAL SECURITY OR FEDERAL TAX NO.	
3B. MAILING ADDRESS				3C. CITY, STATE		3D. ZIP CODE	
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 LESSOR						5A. SOCIAL SECURITY NO., FED TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME		NFB LEASING, A DIVISION OF NEVADA FIRST BANK					
MAILING ADDRESS		PO BOX 81650					
CITY		STATE		ZIP CODE			
LAS VEGAS		NEVADA		89180			
6. ASSIGNEE OF SECURED PARTY (IF ANY)						6A. SOCIAL SECURITY NO., FED TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
NAME							
MAILING ADDRESS							
CITY		STATE		ZIP CODE			
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) APRIL 15 19 92

By: \_\_\_\_\_ (TITLE)  
SIGNATURE(S) OF DEBTOR(S)  
WALTER JAMES BLACK

By: \_\_\_\_\_ (TITLE)  
SIGNATURE(S) OF SECURED PARTY(IES)  
JEANIE WAGNER

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

REQUESTED BY  
Bank of America  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

92 MAY -4 AIO:40

SUBMIT TO BUREAU  
RECORDED  
277740

\$10.00 PAID KE DEPUTY

BOOK 592 PAGE 253 FILING FEE  
WOLCOTTS FORM UCC-2 NV (price class 130) SEE INSTRUCTIONS

11. Return Copy to

NAME BANK OF AMERICA NEVADA

ADDRESS 1785 E. SAHARA AVENUE, SUITE 400

CITY, STATE LAS VEGAS, NEVADA 89104

AND ZIP

(1) FILING OFFICER COPY — ALPHABETICAL

UNIFORM COMMERCIAL CODE - FORM UCC-2 (REV. 7-89) Approved by the Nevada Secretary of State