## 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

			:	<u> </u>
1. FILE NO. OF ORIG. FINANCING STATEMENT 226956	May 30, 1990	April 2, 1990	1	
2. DERTOR IAS APPEARS ON ORIGINAL FINANCING	1.5111 2, 1330	Douglas County  2A. SOCIAL SECURITY ON FEDERAL TAX NO.		
	OPTICOMP CORPORATION,	a Nevada Corporati		THE DESIGNATION OF THE PARTY OF
28. MAILING ADDRESS (AS AFFEARS ON ORIGIN		2C. CITY, STATE	( )	2D. 21P COOE
P. O. Box 10779	Zephyr Co	ve, Nevada	89448	
3. ADDITIONAL DEBTOR (FAM) (ONE NAME OF LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST			3A. SOCIAL SECURITY OF	FEDERAL TAX NO
38. MAILING ADDRESS	<u> </u>	3C. CITY, STATE	1 1	3D. ZIP CODE
4. ADDITIONAL DEBTOR (IF ANY) (OHE NAME O LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST			4A. SOCIAL SECURITY OR	FEDERAL TAX NO.
49. MAILING ADDRESS		4C. CITY, STATE		4D. ZIP CODE
5. SECURED PARTY			BA. SOCIAL SECURITY NO	
	nk of Nevada		TRANSIT AND A B A I	40
MAILING ADORESS P. O. BOX			04 70 4	204
any Reno	state Nevada	ZP COOK 8	9520-0025 94-72/1	.224
6. ASSIGNEE OF SECURED PARTY (FAM)	/	· / \	BA. SOCIAL SECURITY NO TRANSIT AND A B.A. I	
NAME		(	)	
MAILING ADDRESS CITY	STATE	ZIP COOE	/	
7. CONTINUATION—1	The original Financing Statement betwo	een the foregoing Debtor and Se	cured Party bearing the file numb	er and date shown
above is continued.	If collateral is crops or timber, fixtures,	or oil, gas or minerals check her	e 🔲 and insert description of real	property on which
	own or to which affixed or to be affixed on all estate. Effective only if subn			also insert name of
	e collateral described in the Financing		mber shown above, the Secured	Party releases the
ASSIGNMENT—Th	e Secured Party certifies that the Sec	ured Party has assigned to the	Assignee above named, all or pa	
raity's rights under	r the Financing Statement bearing the se Secured Party certifies that the Secu	76. 76. 76.		
the file number sho		ico i arty no tonger cianna a sec	unty interest under the rindhenry (	Statement nearing
	e Financing Statement bearing the file			
	Debtor(s) and Secured Party(i	es) required on all amen	idments)	
B. Name of Secured Part	ty changed to BANK OF A	MEDICA NEVADA SUSSE	ant to the Coutifica	
	es of Incorporation of '			
	s Office on September 1		da liled with the Ne	vaua
boolevary or brace .	, office on september 1	// 13021		
/ /				
OPTICOME CORPORATION	N, a Nevada Corporation		10. This Space for Use of Filing Officer (	Date, Time, Filing Office)
	(Date)	March 30 19 93		
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
By:	Pro	esident/Secretary		
Peter Status 198916		•		
BANK OF AMERICA NEW	App formerly Valley Bank	k of Nevada		
By: Nah // FULL	yl Ac	count Officer	REQUESTED BY	7
SIGNATURE(S) OF SECURED PA	T(ES)	(MLE)	13 of A	N a
Mark McVeigh			IN OFFICIAL RECORDS OF	<b>6</b> 6
TYPE HAME(S)			DOUGLAS CO NEVADA	N K
11. <i>R</i>	eturn Copy to			305202 305202
		¬	93 APR 21 AO:34	
NAME Bank of America	Nevada	1 ,		305202 305202 8K04.938639
ADDRESS P. O. Box 20000			SUZANNE BEAUDREAL	,
CITY, STATE Reno, Nevada 895		· .	RECORDER	· **
	n Closing/MFT	<u> </u>	1//- 1/2	<del></del>
LN311MT531/03263 (1) FILING OFFICER COPY — AL	PHABETICAL	<b>–</b>	\$10 PAIU DEP	•
	ICC-2 (Rev. 7-86) Annumed by the Neverla Sar	restant of State WALCAT	TS FORM INC. 20V John days 13D	FILING FEE