1100

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

STATE OF NEVADA

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

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1. FILE NO. OF ORIG. FINANCING STATEMENT 1 264529	A. DATE OF FILING OF ORIG. FINANCING STATEMENT November 8, 1991	18. DATE OF ORIG. FINANCING STATEME October 14, 1991	nt 10. PLACE OF FIUNG OR Douglas Cou	IG. FINANCING STATEMENT INTV
2. DEBTOR IAS APPEARS ON ORIGINAL FINANCING STATEMENT) IONE HAME ONLY)			2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST)	OPTICOMP CORPORATION, a	Nevada Corporation	88-0221939	
28. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) 2C. CITY, STATE			/\	20. zir coo€ 89448
			, Nevada	
3. ADDITIONAL DEBTOR (FAM) (OHE NAME ONLY) LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST)			3A. SOCIAL SECURITY O	N PEDERAL TAX NO
38. MAILING ADDRESS		3C. CITY, STATE	\ \	3D. ZIP CODE
ADDITIONAL DESTOR (IF ANY) TOHE NAME ONLY) LEGAL BUSINESS NAME			4A. SOCIAL SECURITY O	R FEDERAL TAX NO
INDIVIDUAL (LAST NAME FIRST) 18. MAILING ADDRESS		4C. CITY, STATE		4D. ZIP CODE
5. SECURED PARTY			БА. SOCIAL SECURITY H	
NAME Valley Bank	of Nevada		TRANSIT AND A B A	Ю
MAILING ADDRESS P. O. BOX 20			200 0005 04 72/	1224
an Reno	STATE Nevada	ZP COO€ 89:	520-0025 94-72/	
B. ASSIGNEE OF SECURED PARTY (# ANY)			BA. SOCIAL SECURITY H TRANSIT AND A BA	
NAME			\	\ /
MAILING ADORESS CITY	STATE	ZIP CODE		
RELEASE—From the c collateral described in ASSIGNMENT—The S Party's rights under the TERMINATION—The S the file number shown AMENDMENT—The Fi (Signature of Det S. Name of Secured Party Amendment of Articles	ecured Party certifies that the Secure e Financing Statement bearing the file ecured Party certifies that the Secured above. nancing Statement bearing the file nu otor(s) and Secured Party(ies changed to BANK OF AME of Incorporation of Va	atement bearing the file numb oes not terminate debt. d Party has assigned to the As e number shown above in the o Party no longer claims a securit mber shown above is amende required on all amends RICA NEVADA pursuant lley Bank of Nevada	er shown above, the Secured signee above named, all or pollateral described in Item 8 y interest under the Financing as set forth in Item 8 below ments)	eart of the Secured below. Statement bearing v.
By: By: Peter Standarproyre	7	rch 30 19 93 cident/Secretary). This Space for Use of Filing Officer	(Date, Time, Filing Office
BANK OF AMERICA NEVSAD		ount Officer	REQUESTED BY BOT 1 IN OFFICIAL RECORDS DOUGLAS CO NEVAD	305205
Bank of America N ADDRESS P. O. Box 20000 CITY, STATE Reno, Nevada 8952		7	SUZANNE BEAUDRE	
ACCITY RETION LOGIT LN311MT531/03263/1 (1) FILING OFFICER COPY — ALPI				PUTY
		no of Cours WAI CATTO	FORM UCC-2NV (price class 13 D	FILING FEE SEE INSTRUCTION
UNIFORM COMMERCIAL CODE - FORM UCC			LOUM OFF. WA (hea con 130)	SEE INSTRUCTION