

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 07167 237430	1A. DATE OF FILING OF ORIG FINANCING STATEMENT October 25, 1990	1B. DATE OF ORIG FINANCING STATEMENT October 12, 1990	1C. PLACE OF FILING ORIG FINANCING STATEMENT Douglas County
2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME SCOLARI'S WAREHOUSE MARKETS, INC., a Nevada Corporation <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)			2A. SOCIAL SECURITY OR FEDERAL TAX NO 88-0155348
2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) P.O. Box 5070		2C. CITY, STATE Reno, Nevada	2D. ZIP CODE 89513
3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) SAK 'N SAVE FOOD STORE			3A. SOCIAL SECURITY OR FEDERAL TAX NO
3B. MAILING ADDRESS P.O. Box 5070		3C. CITY, STATE Reno, Nevada	3D. ZIP CODE 89513
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 NAME Valley Bank of Nevada MAILING ADDRESS P.O. Box 20000 CITY Reno STATE Nevada ZIP CODE 89520-0025			5A. SOCIAL SECURITY NO. FED. TAX NO OR BANK TRANSIT AND ABA NO 94-72/1224
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE			6A. SOCIAL SECURITY NO. FED. TAX NO OR BANK TRANSIT AND ABA NO
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) November 30 19 93

By: _____ (TITLE)

Bank of America Nevada formerly Valley Bank of Nevada

By: Penny R. Woolridge Sr. Compliance Analyst (TITLE)

Penny R. Woolridge (TYPE NAME(S))

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

REQUESTED BY
B of A
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

11. **Return Copy to**

NAME **Bank of America Nevada**

ADDRESS **P.O. Box 20000**

CITY, STATE AND ZIP **Reno, NV 89520-0025**

AND ZIP **Attn: CLSC #8906/SW**

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AUZANNE DEAUDREAU
RECORDED

PAID DEPUTY