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

This CTATE	IMENT is presented for filing pursu	unt to the Nevada Haifam Com	marrial Code
PILE NO. OF ORIG. PINANCING STATEMENT 07625		1B. DATE OF ORIG. PINANCING STATEMENT	
SHEETS TIM			2A. SOCIAL SECURITY OF FEBERAL TAR NO.
. MAILING ADDRESS 2838 VICKY LN		2C. CITY, STATE MINDEN NV	2D. 21P CODE 89423
ADDITIONAL DESTOR (IF ANY) (STEVENS LEANNA . MAILING ADDRESS	LAST NAME FIRST)	SC. CITY STATE	3A. SOCIAL SECURITY ON PERSON TAX NO.
2838 VICKY LN		MINDEN NV	89423
MANE NORWEST 3861 S	FINANCIAL NEVADA, INC.		OR BANK TRANSIT AND A.B.A. NO.
CITY CARSON ASSIGNEE OF SECURED PARTY		zip code 8970	SA. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
MAILING ADDRESS	STATE	ZIP CODE	
and date shown abov	e original Financing Statement bet is continued. If collateral is crops e grown in Item 7 below.	tween the foregoing Debtor and Se	cured Party bearing the file number sert description of real property or
RELEASE—From the co	ollateral described in the Financing I described in Item 7 below.	Statement bearing the file number	or shown above, the Secured Paris
ASSIGNMENT—The S	ecured Party certifies that the Secure Financing Statement bearing the f	red Party has assigned to the Assi file number shown above in the co	gnee above named, all the Secure liateral described in Item 7 below.
TERMINATION—The	Secured Party certifies that the Se ofile number shown above.		
AMENDMENT—The F	inancing Statement bearing the firequired on all amendements.)	ile number shown above is amen	ded as set forth in Item 7 below
OTHER			
	(Date) JANU	ARY 26 19 94	Space for Use of Filing Officer (Data, Time, Filing Office)
By: SIGNATURE(8) OF DE NORWEST FINANCIAL	PTOR(8)	(TITLE)	REQUESTED BY
By: TRACY KRUK -	- January Van	LK (TITLE)	IN OFFICIAL RECORDS OF DOUGLAS CO NEVADA
	eturn Copy to	7	94 JNN 31 P2:36
, STATE 386	WEST FINANCIAL 1 S. CARSON ST		SUZANIE BEAUDREAU
(1) Filing Officer Copy - Num	SON CITY NV 89701	_ 328973 94766081	SIG PAIL K2 DEPUTY
IFORM COMMERCIAL CODE-FORM U		フリアロロロロー the Secretary of State	STANDARD FORM—FILING FEE \$4