

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

FILED IN CREDIT OFFICE

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

1. FILE NO. OF ORIG. FINANCING STATEMENT 07490	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT 10/14/92	1B. DATE OF ORIG. FINANCING STATEMENT	1C. PLACE OF FILING ORIG. FINANCING STATEMENT
2. DEBTOR (LAST NAME FIRST) MORGAN, MICHAEL S			2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 0843
2B. MAILING ADDRESS 2743 STEWART AVE		2C. CITY, STATE MINDEN NV	2D. ZIP CODE 89423
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST)			3A. SOCIAL SECURITY OR FEDERAL TAX NO.
3B. MAILING ADDRESS		3C. CITY STATE	3D. ZIP CODE
4. SECURED PARTY NAME NORWEST FINANCIAL NEVADA, INC. MAILING ADDRESS 1982 HWY 50 EAST CITY CARSON CITY STATE NV ZIP CODE 89701			4A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE			5A. SOCIAL SECURITY NO., FED. TAX NO. OR BANK TRANSIT AND A.B.A. NO.

6. 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, check here and insert description of real property on which growing or to be grown in Item 7 below.

RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 7 below.

ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.

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.

AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor required on all amendments.)

OTHER

7. [Large empty space for notes or descriptions]

8. (Date) FEBRUARY 4 19 94

By: _____ (TITLE)
NORWEST FINANCIAL

By: Tracy Kruk (TITLE)
TRACY KRUK - CSR

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

REQUESTED BY
Norwest Financial
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

10. Return Copy to

NAME
ADDRESS
CITY, STATE
AND ZIP

NORWEST FINANCIAL
3861 S. CARSON ST
CARSON CITY NV 89701

329553

94 FEB -7 11:30

SUZANNE BEAUDREAU
RECORDER

PAID 15.00 Ke DEPUTY