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

	B. DATE OF ORIG FINANCING STATE	MENT 1C. PLACE OF FILING ORN	G FMANCING STATEMENT
07673 323244 November 22, 1993	November 4, 19	93 Douglas Co	unty
2. DESTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) LEGAL BUSINESS NAME TOPAZ LODGE, INC., a Nevada INDIVIDUAL (LAST NAME FIRST)	Corporation	2A. SOCIAL SECURITY (88-01957	
29. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT)	2C. CITY, STATE		20. 2# CODE
P.O. Box 187	Gardnervill	e. Nevada	89410
3. ADDITIONAL DESTOR (IF ANY) (ONE NAME ONLY)		3A. SOCIAL SECURITY	OR FEDERAL TAX NO.
LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST)			
38. MAILING ADDRESS	3C. CITY, STATE	\ \	30. 20 COOE
4. ADDITIONAL DESTOR (IF ANY) (ONE NAME ONLY)		4A. SOCIAL SECURITY O	OR FEDERAL TAX NO
LEGAL BUSINESS NAME INDIVIDUAL (LAST NAME FIRST)			
48. MAILING ADDRESS	4C. CITY, STATE	1	4D. 2P CODE
5. SECURED PARTY		5A. SOCIAL SECURITY IN	2 552 117 112 00 011
		TRANSIT AND A B A I	NO THE TAX NO ON BANK
bank of America Nevada, a Nevada ban	king corporatio	76.	04
MALING ADDRESS P.O. Box 20000 CITY Reno STATE Nevada	2P COOK . Q.Q.	94-72/12 520-0025	24
6. ASSIGNEE OF SECURED PARTY (F ANY)	87	6A. SOCIAL SECURITY NO	O, FED TAX NO OF RANK
NAME	(TRANSIT AND A BA.	
MAILING ADDRESS	\ \ \		
CITY STATE	ZIP CODE	/	
7. CONTINUATION—The original Financing Statement between the	foregoing Debtor and Sec	ured Party bearing the file numb	er and date shown
above is continued. If collateral is crops or timber, fixtures, or oil, g			
growing or to be grown or to which affixed or to be affixed or from v			also insert name of
record owner of real estate. Effective only if submitted	within 6 months pr	rior to expiration date.	
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.			
ASSIGNMENT—The Secured Party certifies that the Secured Party's rights under the Financing Statement bearing the file number			
TERMINATION—The Secured Party certifies that the Secured Part			
AMENDMENT—The Financing Statement bearing the file number	er shown above is amend	ed as set forth in Item 8 below	
(Signature of Debtor(s) and Securied Party(ies) re	equired on all ame	ndments)	
By: January (Date) January	19 94	10. This Space for Use of Filing Officer (Date, Time, Filing Office)
Bank of America Nevada Sy: Wice Pres Inda MacLeod TYPE NAME(S)		M OFFICIAL RECOID DOUGLAS CO NE	
11. Return Copy to		74 FEB -7 MI	32
	[•	
MAME Bank of America Nevada		SUZANNE BEAU	DREAU
ADDRESS P.O. Box 20000		RECORDER	
	29555	15 PAIU KO	DEBLITY
AND ZP Attn: CLSC #8906	1	Manual Palu	UEFULT
(1) FILING OFFICER COPY - ALPHABETICAL BK 02-94	PG1221		24 MAP 202
UNIFORM COMMERCIAL CODE - FORM UCC-2 (Rev. 7-86) Approved by the Nevada Secretary of State	 •		FILING FEE SEE INSTRUCTIONS

UNIFORM COMMERCIAL CODE - FORM UCC-2 (Rev. 7-86) Approved by the Nevada Secretary of State M-019-04-037 (2/87)