

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

*Debra Douglas*

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

1. FILE NO. OF ORIG. FINANCING STATEMENT 07688	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT 12/20/93	1B. DATE OF ORIG. FINANCING STATEMENT	1C. PLACE OF FILING ORIG. FINANCING STATEMENT
2. DEBTOR (LAST NAME FIRST) CUEVA, GUADALUPE		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	
2B. MAILING ADDRESS PO BOX 111		2C. CITY, STATE SMITH VALLEY, NV	2D. ZIP CODE 89430
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) CUEVA, ANNA		3A. SOCIAL SECURITY OR FEDERAL TAX NO.	
3B. MAILING ADDRESS SAME		3C. CITY STATE	3D. ZIP CODE
4. SECURED PARTY NAME NORWEST FINANCIAL NEVADA, INC. MAILING ADDRESS 3861 S. CARSON ST 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

THIS SPACE FOR USE OF FILING OFFICER

7.

8. (Date) APRIL 19 19 94

By: NORWEST FINANCIAL (TITLE)

By: TRACY KRUK - CSR (TITLE) *Tracy Y. Truk*

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

REQUESTED BY  
*Norwest Financial*  
IN ORIGINAL RECORDS OF  
DEPARTMENT OF REVENUE

94 MAY -5 09:58

RECEIVED BUREAU  
APR 19 1994

\$16.00 PAID *K2* DEPUTY

10. Return Copy to

NAME ADDRESS CITY, STATE AND ZIP

NORWEST FINANCIAL  
3861 S. CARSON ST  
CARSON CITY, NV 89701

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