

STATE OF NEVADA
UNIFORM COMMERCIAL CODE—FINANCING STATEMENT CHANGE—FORM UCC-2
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 07043		1A. DATE OF FILING OF ORIG. FINANCING STATEMENT 3/19/90		1B. DATE OF ORIG. FINANCING STATEMENT		1C. PLACE OF FILING ORIG. FINANCING STATEMENT	
2. DEBTOR (LAST NAME FIRST) EDMONDS, MARK E.						2A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 7115	
2B. MAILING ADDRESS PO BOX 698				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 PO BOX 2549 CITY CARSON CITY STATE NV ZIP CODE 89702						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.	

- A 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.
- B 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.
- C 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.
- D 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 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.)
- F OTHER

7.

8. (Date) MAY 19 1994

By: _____
SIGNATURE(S) OF DEBTOR(S) (TITLE)
NORWEST FINANCIAL

By: Tracy Kruk
SIGNATURE(S) OF SECURED PARTY(IES) (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

338040

94 MAY 23 10:58

SUZANNE BEAUDREAU
RECORDER
\$15.00 PAID TR DEPUTY

STANDARD FORM—FILING FEE \$4.00

THIS SPACE FOR USE OF FILING OFFICER