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

UNIFORM COMMERCIAL CODE - FINANCING STATEMENT - FORM UCC-1 IMPORTANT Read instructions on back before filling out form.

WOLCOTTS FORM UCC-1NV price class 13E

THIS SPACE FOR USE OF FILING OFFICER

| SLEGAL BUSINESS NAME CHOMOTOCAL LAST MANE (MRC) 18. MALING ADDRESS 1480 MAI IN STREET 24. ADDITIONAL DESTORS AWAY (SIE MANE (MRC)) 15. MAINTONAL DESTORS AWAY (SIE MANE (MRC)) 16. MINING ADDRESS 26. RESIDENCE ADDRESS 27. CITY, STATE 28. MAINTONAL DESTORS (SIE MANE (MRC)) 18. MAIL MARCH ADDRESS 29. CITY, STATE 29. CITY, STATE 29. CITY, STATE 20. CITY, STATE 20. CITY, STATE 20. CITY, STATE 20. CITY, STATE 21. CODE 20. CITY, STATE 21. CODE 21. CITY, STATE 27. CITY, STATE 28. MOVED AND ADDRESS 29. CITY (MRC) 30. This FINANCING STATEMENT covers the following types or items of property (if crops of timber, include description of real proper and name of record owner of such real estate; (if) gas or minerals, include description of real proper and name of record owner of such real estate; (if) gas or minerals, include description of real proper and name of record owner of such real estate; (if) gas or minerals, include description of real proper and name of record owner of such real estate; (if) gas or minerals, include description of real property from which were controlled to the control of real property from which were controlled to the control of the control | |
|--|--|
| 18. MALING ADDRESS 1480 Main Street 18. RESIDENCE ADDRESS 19. CITY, STATE 2 ADDITIONAL DESTOR OF ANY IONE NAME ONLY) CHECAL BUSINESS NAME CHONDYLOUAL LOST NAME PRIST) 28. MALING ADDRESS 29. CITY, STATE 20. CITY, STATE 20. CITY, STATE 21. ADDITIONAL DESTOR OF ANY IONE NAME ONLY) CHECAL BUSINESS NAME CHONDYLOUAL LOST NAME PRIST) 22. CITY, STATE 23. ADDITIONAL DESTOR(S) ON ATTACHED SHEET 4. SECURED PARTY SAME P. O. BOX 98624 MALING ADDRESS 21. CITY, STATE 4. SECURED PARTY NAME P. O. BOX 98624 MALING ADDRESS CITY IN STATE 5. ASSIGNEE OF SECURED PARTY IF ANY NAME MALING ADDRESS CITY THIS FINANCING STATEMENT covers the following types or items of property (if crops of timber, include description of real property of and name of record owner of such real estate; if fluxtures, include description of real property from which are property from the property f | SOCIAL SECURITY OF FEDERAL TAX NO. |
| 1E. RESIDENCE ADDRESS 2. ADDITIONAL DESTOR (IF ANY) (ONE NAME ONLY) C) LEGAL BUSINESS NAME C) CHARDOLAL LOST NAME FIRST) 2E. MALLING ADDRESS 2E. RESIDENCE ADDRESS 2F. CITY, STATE 2A. SECURED PARTY Bank of America, FSB NAME P. O. Box 98624 MALLING ADDRESS 2. F. CITY, STATE 4. SECURED PARTY Bank of America, FSB NAME P. O. Box 98624 MALLING ADDRESS CITY 5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MALLING ADDRESS CITY 6. This FINANCING STATEMENT covers the following types or items of property (if crops of timber, include description of real property and name of record owner of such real estate; if include description of real property and name of record owner of such real estate; if incure, and update description of real property and name of record owner of such real estate; if incure, and update description of real property and name of record owner of such real estate; if incure, include description of real property and name of record owner of such real estate; if incure, include description of real property and name of record owner of such real estate; if incure, and update description of real property and name of record owner of such real estate; if incure, include description of real property and name of record owner of such real estate; if incure, include description of real property and name of record owner of such real estate; if incure, include description of real property and name of record owner of such real estate; if incures, include description of real property and name of record owner of such real estate; if incures, include description of real property and name of record owner of such real estate; if incures, include description of real property and name of record owner of such real estate; if incures, include description of real property and name of record owner of such real estate; if incures, include description of real property and name of record owner of such real estate; if incures, include description of real property and name of record owner of such real estate; if incures, include desc | 1 D. ZIP CODE |
| 2. ADDITIONAL DESTORIE ANY (ONE NAME ONLY) C) LIGAL BUSINESS NAME C) LIGAL BUSINESS CONTROLLED C) LIGAL BUSINESS NAME C) LIGAL BUSINESS C) | 89410 |
| DESCRIPTION OF DESCRIPTION AND STATE OF PROCESS 2C. CITY. STATE 26. MAILING ADDRESS 2F. CITY. STATE 3. | 1 G. ZIP CODI |
| 2E. RESIDENCE ADDRESS 2E. RESIDENCE ADDRESS 2F. CITY. STATE 2F. CITY. STATE 2F. CITY. STATE 2F. CITY. STATE 3. | SOCIAL SECURITY OR FEBERAL TAX NO. |
| 3. ADDITIONAL DEBTORIS) ON ATTACHED SHEET 4. SECURED PARTY Bank of America, FSB NAME P. 0. Box 98624 MAILING ADDRESS Las Vegas STATE 5. ASSIGNEE OF SECURED PARTY (FAMY) NAME MAILING ADDRESS CITY 6. This FINANCING STATEMENT covers the following types or items of property (Forces or timber, include description of real property or items of property (Forces or timber, include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), include description of real property or items of property (Forces or items), and property or items of property or items of property or items of property (Forces or items), and property or items of property (Forces or items), and property or items of property (Forces or items), and property or items of property (Forces or items), and property or items of property (Forces or items), and property or items of property (Forces or items), and property or items of property (Forces or items), and property or items of property (Forces or items), and property or items of property (Forces or items), and property or items of property (Forces or items), and pro | 2D. zip cod |
| A SECURED PARTY Bank of America, FSB P. O. Box 98624 Las Vegas STATE STATE CITY 6. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property and name of record owner of such real estate; if fixtures, include description of real property and name of record owner of such real estate; if fixtures, include description of real property from what is a considered and name of record owner of such real estate; if only gas or minerals, include description of real property from what is a considered and name of record owner of such real estate; if only gas or minerals, include description of real property from what is a considered in the property from the property of the property from the property of the | 2G, ZIP COD |
| Bank of America, FSB NAME P. 0. Box 98624 Bas Vegas STATE Nevada 89193-8624 ZIP CODE 5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE STATE STATE STATE ZIP CODE 5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE STATE ZIP CODE 5. ASSIGNEE OF SECURED PARTY (IF ANY) A MAILING ADDRESS CITY STATE STATE ZIP CODE 5. ASSIGNEE OF SECURED PARTY (IF ANY) A MAILING ADDRESS CITY STATE STATE ZIP CODE 5. ASSIGNEE OF SECURED PARTY (IF ANY) A MAILING ADDRESS CITY STATE STATE ZIP CODE 5. ASSIGNATION AND AND AND AND AND AND AND AND AND AN | |
| MAILING ADDRESS CITY STATE STATE Nevada 89193-8624 ZIP CODE 5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE 5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE 5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY 5. ASSIGNEE OF SECURED PARTY (IF ANY) A LI equipment and machinery of record owner of such real estate; if fixer es, include description of real property and name of record owner of such real estate; if oil, gas or minerals, include description of real property from which all equipment and machinery, including power-driven machinery and equipment and furniture acquired, wherever located, together with all replacements thereof, all affactments, access belonging thereto or for use in connection therewith. All inventory, raw materials, work in owned or hereafter acquired, wherever located. All accounts receivable now outstanding or contract rights and general intangibles now in force or hereafter acquired. 6. A. SIGNATURE OF RECORD OWNER OF REAL PROPERTY 7. Check A Record Owner of REAL PROPERTY 7. Check A Collateral ore also collateral ore also covered and collateral ore also covered and collateral ore also covered and covered and contract rights and security interest was partered place covered and covered an | SOCIAL SECURITY NO. FEDERAL TAX |
| MAILING ADDRESS CITY 5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY 5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS 6. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property and name of record owner of such real estate; if fixtures, include description of real property from will all equipment and machinery, including power-driven machinery and equipment and furniture acquired, wherever located, together with all replacements thereof, all attachments, access belonging thereto or for use in connection therewith. All inventory, raw materials, work in owned or hereafter acquired, wherever located. All accounts receivable now outstanding or contract rights and general intangibles now in force or hereafter acquired. 6A. SIGNATURE OF RECORD OWNER 6B. (TYPEI RECORD OWNER OF REAL PROPERTY 7. Check (X) Applicable 8. Check (X) Applicable 9. Check (X) Applicable 10. DEBIOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704 205 AND NRS 104,9403 9. (Date) October 13, 19.95 NO FSBOR-CORDANATION, a Nevada corporation President/Secretary 6A, American Americ | 93-1037528 |
| 5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE STAT | 95-1057520 |
| All equipment and machinery, including power-driven machinery and equipment and furniture acquired, wherever located, together with all replacements thereof, all attachments, access belonging thereto or for use in connection therewith. All inventory, raw materials, work in owned or hereafter acquired, wherever located, wherever located. All accounts receivable now outstanding or contract rights and general intangibles now in force or hereafter acquired. SIGNATURE OF RECORD OWNER OF REAL PROPERTY Signature for the also covered B Products of also covered Proceeds of also covered C Proceeds of above described original collateral in which a security interest was perfected Debtors Symmium Monitor For the also covered Debtors Symmium Monitor For the America Debtors Symmium Monitor Debto | |
| 6. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property and name of record owner of such real estate; if fixtures, include description of real property and name of record owner of such real estate; if fixtures, include description of real property and name of record owner of such real estate; if fixtures, include description of real property from which are not and machinery, including power-driven machinery and equipment and furniture acquired, wherever located, together with all replacements thereof, all attachments, access belonging thereto or for use in connection therewith. All inventory, raw materials, work in owned or hereafter acquired, wherever located. All accounts receivable now outstanding or contract rights and general intangibles now in force or hereafter acquired. 6A. SIGNATURE OF RECORD OWNER OF REAL PROPERTY 7. Check A Proceeds of a B Products of collateral are also covered also covered also covered or associately inferest was perfected or security inferest was perfected also covered also covered (Destors Signature Not Required) 8. Check A DEBIOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE with NRS 704.205 AND NRS 104.9403 9. (Date) October 13, 19.95 NO FSBOS CORREATERN, a Nevada corporation President/Secretary Signature of RECORD OWNER OF REAL PROPERTY TYPE NAME(S) John Fisher Dank of Americal Signature (S) John Fisher TYPE NAME(S) Bank of Americal Signature (S) John Fisher | SOCIAL SECURITY NO . FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. |
| 6. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property and name of record owner of such real estate; if if ixtures, include description of real property and name of record owner of such real estate; if in itemerals, include description of real property from with all requipment and machinery, including power-driven machinery and equipment and furniture acquired, wherever located, together with all replacements thereof, all attachments, access belonging thereto or for use in connection therewith. All inventory, raw materials, work in owned or hereafter acquired, wherever located. All accounts receivable now outstanding or contract rights and general intangibles now in force or hereafter acquired. 6A. SIGNATURE OF RECORD OWNER 6B. ITYPET RECORD OWNER OF REAL PROPERTY 7. Check | ~ |
| 6. This FINANCING STATEMENT covers the following types or items of property (if crops or timber, include description of real property and name of record owner of such real estate; (if) uses or minerals, include description of real property from what name of record owner of such real estate; (if) uses or minerals, include description of real property from what name of record owner of such real estate; (if) uses or minerals, include description of real property from what name of record owner of real property from what name of record owner of real estate; (if) uses of the property and equipment and furniture acquired, wherever located, together with all replacements thereof, all attachments, access belonging thereto or for use in connection therewith. All inventory, raw materials, work in owned or hereafter acquired, wherever located. All accounts receivable now outstanding or contract rights and general intangibles now in force or hereafter acquired. 6A. SIGNATURE OF RECORD OWNER OF REAL PROPERTY 7. Check X | |
| growing or to be growing and name of record owner of such real estate; if fixtures, include description of real property and name of record owner of such real estate; if oil, gas or minerals, include description of real property from with all replacements, include description of real property from with all replacements, include description of real property from with all replacements, include description of real property from with all replacements, include description of real property from with all replacements, include description of real property and name of real property and equipment and furniture acquired all property and replacements, include description of real property and equipment and furniture acquired, wherever located, ill accounts receivable now outstanding or contract rights and general intangibles now in force or hereafter acquired. A | · · · · · · · · · · · · · · · · · · · |
| If A X collateral are also covered also cove | hereafter arising. Al |
| Applicable also covered also covered also covered (Debtors Signature Not Required) B. Check X If DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403 9. (Date) October 13. 19 95 NO FSBOS CORRORATION, a Nevada corporation By: X President/Secretary John Fisher Bank of American Secretary TYPE NAME(S) Bank of American Secretary Bank of American Secretary | lateral was brought into this State |
| DEBTOR IS A "TRANSMITTING UTILITY" IN ACCORDANCE WITH NRS 704.205 AND NRS 104.9403 Applicable 9. (Date) October 13, 19 95 NO FSBOS CORRORATION, a Nevada corporation By: X President/Secretary John Fisher Bank of America 158 | isdiction |
| NO FSBOS CORRERATION, a Nevada corporation By: X President/Secretary John Fisher Bank of America TSB | otors Signature Not Required) |
| NO FSBOS CORRORATION, a Nevada corporation By: X President/Secretary (TiTLE) John Fisher Bank of America TSB | = |
| John Fisher Bank of America TSB | |
| John Fisher Bank of America TSB | • • |
| Bank of America SB | 00005 |
| Dalik of Allier I car I say | UBUUD |
| | |
| By: Vice President | en e |
| SIGNATURE(S) OF SECURED PARTY(IES) (TITLE) | 4 manual manual 258 |
| Kathleen Pechman | REQUESTED BY |
| TYPE NAME(S) | DO A |
| 0 Return Copy to | DIREAS CO. HE WADA |
| Bank of America, FSB | |
| NAME Attn: Barbara Burton | NT 10 DO MA |
| ADDRESS P. 0. Box 98624 (Unit #51002) | m 10 LTRD |
| CITY, STATE Las Vegas, Nevada 89193-8624 | |
| RE: NO FSBOS CORPORATION | - 14 - 414 4 5 |
| (1) FILING OFFICER CORY ALBHARETICAL 373035 | LINDA SLATER |
| (1) FILING OFFICER COPY — ALPHABETICAL UNIFORM COMMERCIAL CODE: FORM UCC:1 (REV. 7-86) Approved by the Nevada Secretary of State | LINDA SLATER RECORDER |

BK 1095PG2986