

16. **UNIFORM COMMERCIAL CODE — FINANCING STATEMENT CHANGE — FORM N-UCC-2**

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

IMPORTANT:

DOUGLAS COUNTY NEVADA

Receipt No.

Read instructions on back before filling out form.

1. File No. of Original Financing Statement 353610 BK0195 PG0068		1A. Date of Filing of Orig. Financing Statement 01/03/95		1B. Date of Orig. Financing Statement		1C. Place of Orig. Financing Statement DOUGLAS COUNTY, NV	
2. DEBTOR (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) PORT OF SAIL, INC., A NEVADA CORPORATION				2A. SOCIAL SECURITY OR FEDERAL TAX NO. 88-0318509			
2B. MAILING ADDRESS 1337 HIGHWAY #395				2C. CITY, STATE GARDNERVILLE, NV		2D. ZIP CODE 89410	
3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) PORT OF SUBS OF GARDNERVILLE				3A. SOCIAL SECURITY OR FEDERAL TAX NO.			
3B. MAILING ADDRESS 1337 HIGHWAY #395				3C. CITY, STATE GARDNERVILLE, NV		3D. ZIP CODE 89410	

4.  ADDITIONAL DEBTOR(S) ON ATTACHED SHEET

5. SECURED PARTY

NAME U.S. BANK NATIONAL ASSOCIATION FKA U.S. BANK OF NEVADA		4A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS 2300 W. SAHARA AVENUE, 2ND FLOOR		88-0196792	
CITY LAS VEGAS	STATE NV	ZIP CODE 89102	

6. ASSIGNEE OF SECURED PARTY (IF ANY)

NAME		5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO.	
MAILING ADDRESS			
CITY	STATE	ZIP CODE	

7.

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, fixtures, or oil, gas or minerals check here  and insert description of real property on which growing or to be grown or to which affixed or to be affixed or from which to be extracted in Item 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted within 6 months prior to expiration date.

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 8 below. Release does not terminate debt.

C  ASSIGNMENT--The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 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 8 below. Any changes made to Items 2 thru 6 above must be made in Item 8 below. (Signature of Debtor(s) and Secured Party(ies) required on all amendments.)

8.

9.

(Date) JULY 14, 1999

By \_\_\_\_\_ (TITLE)

SIGNATURE(S) OF DEBTOR(S)

By SOPHIA HUYNH *Sophia Huynh* 7-14-99 PERFECTION SPECIALIST  
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

U.S. BANK NATIONAL ASSOCIATION FKA U.S. BANK OF NEVADA  
TYPE NAME(S)

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

REQUESTED BY  
*Managers Account*  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA

'99 JUL 19 P2:33

LINDA SLATER  
RECORDER  
\$16.00 PAID *LD* DEPUTY

10. Return Copy To

U.S. BANK, NATIONAL ASSOCIATION 1  
NAME 882-6846797888  
ADDRESS PO BOX 5308  
CITY, STATE PORTLAND, OR 97228

0472760  
BK0799PG3170

(07858)