

UNIFORM COMMERCIAL CODE - FINANCING STATEMENT CHANGE - FORM N-UCC-2

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

IMPORTANT:

Read instructions on back before filling out form NV-Douglas County

Receipt No. _____

1. File No. of Orig. Financing Statement 398237		1A. Date of Filing of Orig. Financing Statement 10/08/1996		1B. Date of Orig. Financing Statement		1C. Place of Filing Orig. Financing Statement Douglas County	
2. DEBTOR (As Appears on Original Financing Statement) (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Smart SMR of California, Inc.						2A. SOCIAL SECURITY OR FEDERAL 22-3130303	
2B. MAILING ADDRESS (As Appears on Original Financing Statement) 1505 Farm Credit Drive--Suite 100				2C. CITY, STATE MCLEAN, VA		2D. ZIP 22102	
3. ADDITIONAL DEBTOR (If Any) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)						3A. SOCIAL SECURITY OR FEDERAL	
3B. MAILING ADDRESS				3C. CITY, STATE		3D. ZIP	
4. <input type="checkbox"/> ADDITIONAL DEBTOR (S) ON ATTACHED SHEET							
5. SECURED PARTY NAME The Chase Manhattan Bank, as Collateral Agent MAILING ADDRESS 200 Jericho Quadrangle CITY JERICHO STATE NY ZIP CODE 11753						5A. SOCIAL SECURITY NO. FEDERAL TAX NO. 13-4994650	
6. ASSIGNEE OF SECURED PARTY (If Any) NAME MAILING ADDRESS CITY STATE ZIP CODE						6A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A.	
7.							
A. <input type="checkbox"/> 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 <input type="checkbox"/> 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. <input type="checkbox"/> 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. <input type="checkbox"/> 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. <input checked="" type="checkbox"/> 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. <input type="checkbox"/> AMENDMENT-The Financing Statement bearing the file number shown above is amended as set forth in Item 8 below. (Signature of Debtor(s) and Secured Party(ies) required on all amendments.)							
8.							

504258/50(15)

THIS SPACE FOR USE OF FILING OFFICER

9.

(Date) _____ 19__

By _____
SIGNATURE(S) OF DEBTOR(S) (TITLE)

_____ TYPE NAME(S)

By *Tracey Ewing*
SIGNATURE(S) OF SECURED PARTY(IES) TRACEY EWING (TITLE) VP
The Chase Manhattan Bank, as Collateral Agent
TYPE NAME(S)

10. This Space for Use of Filing Officer: (Date, Time, File Number and Filing Officer)

0486874
BK200PG3861

11

Return Copy to:

Return To:
CSC
P.O. Box 591
Attn: UCC Dept.
Wilmington, DE 19899-0591

Trust Account Number (if _____)

NAME
ADDRESS
CITY,
STATE

YELLOW-Alphabetical; PINK-Acknowledgement;
GREEN-Secured Party; BLUE-Debtor.
(Filing Fees: See Instructions)

COPY

REQUESTED BY

CSC

IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2000 FEB 25 AM 11:04

LINDA SLATER
RECORDER

\$16⁰⁰ PAID *ka* DEPUTY

0486874

BK0200PG3862