

16-

06790

REORDER FROM
Registre, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN, 55303
(612) 421-1713

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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.

Receipt No. _____

1. File No. of Orig. Financing Statement 405468 (08216)	1A. Date of Filing of Orig. Financing Statement Jan 27, 1997	1B. Date of Orig. Financing Statement Bk0197 PG 3586	1C. Place of Filing Orig. Financing Statement Douglas Cty Recorder
2. DEBTOR (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) THE PLIMPTON GROUP			2A. SOCIAL SECURITY OR FEDERAL TAX NO. 88-0167214
2B. MAILING ADDRESS 1795 IRONWOOD		2C. CITY, STATE MINDEN, NV	2D. ZIP CODE 89423
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 TAX NO.
3B. MAILING ADDRESS		3C. CITY, STATE	3D. ZIP CODE
4. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET			
5. SECURED PARTY NAME TELERENT LEASING CORPORATION MAILING ADDRESS P.O. BOX 26627 CITY RALEIGH STATE NC ZIP CODE 27611			5A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B.A. NO. 13-3491938
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. NO.
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. 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. Doorlocks & Related Equipment installed in Days Inn, 3103 N. Carson St., Carson City, NV 89701 in accordance with the terms of Lease #9155			

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) July 10 19 2000

By _____ (TITLE)

SIGNATURE(S) OF DEBTOR(S)

By Kathryn L. Raitz (TITLE) Adm. Asst.

SIGNATURE(S) OF SECURED PARTY(IES)

Kathryn L. Raitz

TYPE NAME(S)

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

11. **Return Copy to:**

NAME **TELERENT LEASING CORPORATION**

ADDRESS **Attn: K Raitz 9155**

CITY, STATE **P.O. Box 26627**

AND ZIP **Raleigh, NC 27611**

Trust Account Number (If Applicable)

0497320
BK0800PG1396

YELLOW—Alphabetical; PINK—Acknowledgement; GREEN—Secured Party; BLUE—Debtor.

COPY

REQUESTED BY
Telerent Leasing
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA

2000 AUG -8 AM 10: 27

LINDA SLATER
RECORDER

\$110.⁰⁰ PAID *Plr* DEPUTY

0497320

BK0800PG1397