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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 before filling out form. This form must be accompanied by appropriate fees.**

1. File No. of Orig. Financing Statement 332933 Bk #0394, Pg #4029-4030		1 A. Date of filing of Orig. Financing Statement March 22, 1994		1 B. Date of Orig. Financing Statement March 8, 1994		1 C. Place of Filing Orig. Financing Statement Douglas County Recorder	
2. DEBTOR (ONE NAME ONLY) <input checked="" type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) Sierra Tahoe Insurance Agencies, a Nevada corporation				2 A. SOCIAL SECURITY OR FEDERAL TAX NO. [REDACTED] 2566			
2 B. MAILING ADDRESS 1516 Highway 395 #D				2 C. CITY, STATE Gardnerville, Nevada		2 D. 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) Carson Valley Insurance				3A. SOCIAL SECURITY OR FEDERAL TAX NO.			
3 B. MAILING ADDRESS 1516 Highway 395 #D				3 C. CITY, STATE Gardnerville, Nevada		3 D. ZIP CODE 89410	
4. <input type="checkbox"/> ADDITIONAL DEBTOR(S) ON ATTACHED SHEET							
5. SECURED PARTY NAME Bank of America Nevada MAILING ADDRESS P.O. Box 98624 CITY Las Vegas STATE Nevada ZIP CODE 89193-8624						4 A. SOCIAL SECURITY NO. FEDERAL TAX NO. OR BANK TRANSIT AND A.B. A. NO. 94-72/1224	
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE						5 A. 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 <input type="checkbox"/> 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. <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 to be 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) 5-4-01

By \_\_\_\_\_  
SIGNATURE(S) OF DEBTOR(S) (TITLE)

TYPE NAME(S)

By Michelle Ortiz  
SIGNATURE(S) OF SECURED PARTY(IES) (TITLE)

Michelle Ortiz, Vice President, Bank of America, N.A., successor to Bank of America Nevada  
TYPE NAME(S)

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

REQUESTED BY  
**STEWART TITLE of DOUGLAS COUNTY**  
IN OFFICIAL RECORDS OF  
DOUGLAS CO., NEVADA  
2001 MAY -8 AM 10:33  
LINDA SLATER  
RECORDER  
\$16 PAID KS DEPUTY

11. Return Copy to:

NAME ADDRESS CITY, STATE AND ZIP	James L. Scott Sierra Tahoe Insurance Agencies P.O. Box 217 Gardnerville, NV 89410	Trust Account Number (if Applicable)
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