CC FINANCING STATEMENT AMEN DLLOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional]		WERNER CHRISTE RECORDER	
SEND ACKNOWLEDGMENT TO: (Name and Address) First Mutual Bank P.O. Box 1647	ر د	\$20 PAID K 2 DI	EPUTY
Bellevue, WA 98009.		OVE SPACE IS FOR FILING OFFICE I	JSE ONLY
i. INITIAL FINANCING STATEMENT FILE# bk0203 pg 07380	02=19=03	1b. This FINANCING STATEM to be filed [for record] (or real REAL ESTATE RECORDS	Annual and Standard
TERMINATION: Effectiveness of the Financing Statement iden			
CONTINUATION: Effectiveness of the Financing Statement is continued for the additional period provided by applicable law.	identified above with respect to security interest(s) of the	s Secured Party authorizing this Continuatio	n Statement is
ASSIGNMENT (full or partial): Give name of assignee in item	7a or 7b and address of assignee in item 7c; and also give	e name of assignor in item 9.	
Also check one of the following three boxes and provide appropriate in CHANGE name and/or address: Give current record name in item name (if name change) in item 7a or 7b and/or new address (if add CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME		acord name ADD name: Complete ite or 6b.	m 7a or 7b, and a ms 7d-7g (if appli
ROWLEY	FIRST NAME	MIDDLE NAME	SUFFIX
INO II DE I	Derek	G.	l l
CHANGED (NEW) OR ADDED INFORMATION:	Derek	G.	
	Derek	G.	
CHANGED (NEW) OR ADDED INFORMATION: 78. ORGANIZATION'S NAME First Mutual Bank	FIRST NAME	MIDDLE NAME	SUFFIX
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME First Mutual Bank 7b. INDIVIDUAL'S LAST NAME :: MAILING ADDRESS	FIRST NAME	MIDDLE NAME STATE POSTAL CODE	COUNT
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME First Mutual Bank 7b. INDIVIDUAL'S LAST NAME 2. MAILING ADDRESS PO Box 1647	FIRST NAME CITY Bellevue	MIDDLE NAME STATE POSTAL CODE WA 98009-1647	COUNTI
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME First Mutual Bank 7b. INDIVIDUAL'S LAST NAME 3. MAILING ADDRESS PO Box 1647 4. TAX ID #; SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box	FIRST NAME CITY Bellevue JIZATION 71. JURISDICTION OF ORGANIZATION	MIDDLE NAME STATE POSTAL CODE WA 98009-1647 7g. ORGANIZATIONAL ID #, if s	COUNTI
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	FIRST NAME CITY Bellevue SIZATION 7f. JURISDICTION OF ORGANIZATION C. stated collateral description, or describe collateral	MIDDLE NAME STATE POSTAL CODE WA 98009-1647 7g. ORGANIZATIONAL ID #, if a passigned.	COUNTI USA any
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	FIRST NAME CITY Bellevue 7f. JURISDICTION OF ORGANIZATION c. stated collateral description, or describe collateral RG SYSTEM RECORDED IN THE R	MIDDLE NAME STATE POSTAL CODE WA 98009-1647 7g. ORGANIZATIONAL ID #, if a passigned.	COUNTI USA any
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME First Mutual Bank 7b. INDIVIDUAL'S LAST NAME :: MAILING ADDRESS PO Box 1647 I. TAX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR AMENDMENT (COLLATERAL CHANGE): check only one box Describe collateral deleted or added, or give entire res	FIRST NAME CITY Bellevue 7f. JURISDICTION OF ORGANIZATION c. stated collateral description, or describe collateral RG SYSTEM RECORDED IN THE R	MIDDLE NAME STATE POSTAL CODE WA 98009-1647 7g. ORGANIZATIONAL ID #, if a passigned.	COUNTI USA any
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CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	FIRST NAME CITY Bellevue IZATION 7f. JURISDICTION OF ORGANIZATION C. ISTATION RECORDED IN THE R NV 89703 G THIS AMENDMENT (name of assignor, if this is an	MIDDLE NAME STATE POSTAL CODE WA 98009-1647 7g. ORGANIZATIONAL ID #, if sassigned.	COUNTI USA any
CHANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME	FIRST NAME CITY Bellevue IZATION 7f. JURISDICTION OF ORGANIZATION C. ISTATION RECORDED IN THE R NV 89703 G THIS AMENDMENT (name of assignor, if this is an	STATE POSTAL CODE WA 98009-1647 Tg. ORGANIZATIONAL ID #, if a assigned. EAL ESTATE RECORDS OF	COUNTE USA any

FILING OFFICE COPY — NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98) NATUCC3 4/23/01 C T System Online

(08759)

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FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)				\ \
bk. 0203	pq 07380 02-19-03			\ \
NAME OF PARTY AUTHORIZING T 12a. ORGANIZATION'S NAME	HIS AMENDMENT (same as it	em 9 on Amendment form)		\ \
Sierra View Holdings Inc.				\ \
12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX		\ \
				\ \
Use this space for additional informat	ion			
			THE AROVE SPACE IS	FOR FILING OFFICE USE ONLY
			THE ABOVE STACE IS	OR FILING OF FICE COL CITE
EBTOR'S NAME: ROWLEY	, Derek			
DDITIONAL DEBTOR'S NA	AME: ROWLEY, Gen	ine		
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