

UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A NAME & PHONE OF CONTACT AT FILER [optional]
Phone (800) 331-3282 Fax (818) 662-4141

B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 16915 US BANK PORTLA

CT Lien Solutions 16263238
P.O. Box 29071
Glendale, CA 91209-9071 NVNV
FIXTURE

DOC # 0732462 11/05/2008 12:38 PM Deputy: So OFFICIAL RECORD Requested By: UCC DIRECT

> Douglas County - NV Karen Ellison - Recorder

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INITIAL FINANCING STATEMENT FILE 0611057 BK 0404 PG 11276 0	# 04/23/04 CC NV Douglas		1b. This FINANCING STA to be filed [for record] REAL ESTATE RECO	ATEMENT AMENDMEN (or recorded) in the ORDS.
TERMINATION: Effectiveness of the	Financing Statement identified above is term	inated with respect to security interest(s)	of the Secured Party authorizing	this Termination States
X CONTINUATION: Effectiveness of the continued for the additional period provided	Financing Statement identified above with real by applicable law.	spect to the security interest(s) of the Sec	cured Party authorizing this Conti	inuation Statement is
	name of assignee in item 7a or 7b and	address of assignee in 7c; and also	give name of assignor in ite	em 9.
AMENDMENT (PARTY INFORMATION):  Also check one of the following three box CHANGE name and/or address: Give currer name (if name change) in item 7a or 7b and		w □□ DELETE name: Give record i	: name ADD name: Comp	lete item 7a or 7b. and a slete items 7d-7g (if app
CURRENT RECORD INFORMATION:  60. ORGANIZATION'S NAME  W.R. TECHNOLOGY PARK, L	LQ	$\overline{}$		
6b. INDIVIDUAL'S LAST NAME	FIRST	NAME	MIDDLE NAME	SUFFIX
7a. ORGANIZATION'S NAME	ATION:	<del>\ \ \ \</del>	$\rightarrow$	-
		\ \ \	<b>V</b> .	<u> </u>
7b. INDIVIDUAL'S LAST NAME	FIRST	NAME	MIDDLE NAME	SUFFIX
MAILING ADDRESS	CITY		STATE POSTAL CODE	COUNTE
SEE INSTRUCTION   ADD'I INFO RE	7e. TYPE OF ORGANIZATION 7f. JU	RISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #	, if any
ORGANIZATION DEBTOR				П
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ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE)  Describe collateral deleted or added	1, or give entire restated collateral des	(name of assignor, if this is an Assignme	ent). If this is an Amendment auth	orized by a Debtor whic
ORGANIZATION DEBTOR  AMENDMENT (COLLATERAL CHANGE)	D AUTHORIZING THIS AMENDMENT	(name of assignor, if this is an Assignme	ent). If this is an Amendment auth	orized by a Debtor whic

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 0611057 BK 0404 PG 11276 04/23/04 CC NV Douglas 12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as Item 9 on Amendment form) 12a, ORGANIZATION'S NAME U.S. BANK NATIONAL ASSOCIATION 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

13. Use this space for additional information

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Description: PARCEL 20, SEC 2, T12N, R20E, M.D.B. & M, DOUGLAS CTY, NV. 7/5/79. BK 779, PG 199 AS FILE # 34176.

PG~ 579 11/05/2008