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DOUGLAS COUNTY, NV

Rec:\$60.00 Total:\$60.00

2015-857884 03/05/2015 04:09 PM

CT LIEN SOLUTIONS

Pgs=2



KAREN ELLISON, RECORDER

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) Phone: (800) 331-3282 Fax: (818) 662-4141		
B. E-MAIL CONTACT AT FILER (optional) CLS-CTLS_Glendale_Customer_Service@wolterskluwer.com		
C. SEND ACKNOWLEDGMENT TO: (Name and Address)	10656 - PCS Receivables	
CT Lien Solutions P.O. Box 29071	47032756	
Glendale, CA 91209-9071	NVNV	
	FIXTURE	
File with: Douglas, NV		

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER 0763261 B-0510 P-1214 5/7/2010 CC NV Dou	glas 1b. This FINANCING (or recorded) in Filer: attach Amer	G STATEMENT AMENDMENT is to be filed [to the REAL ESTATE RECORDS adment Addendum (Form UCC3Ad) <u>and</u> provide Debto	or record) or's name in item 13
TERMINATION: Effectiveness of the Financing Statement is Statement			
ASSIGNMENT (full or partial): Provide name of Assignee in For partial assignment, complete items 7 and 9 <u>and</u> also ince	item 7a or 7b, <u>and</u> address of Assignee in item 7c <u>and</u> r dicate affected collateral in item 8	ame of Assignor in item 9	
CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable la		Secured Party authorizing this Continuation S	Statement is
5. PARTY INFORMATION CHANGE:	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	AND Check one of these three boxes to:		
This Change affects Debtor or Secured Party of record	CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c	ADD name: Complete item DELETE name: 7a or 7b, and item 7c DELETE name:	Give record name item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Inform	nation Change - provide only one name (6a or 6b)		
6a. ORGANIZATION'S NAME			
OR 6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
NOVOA	LAURA		1
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or	Porty Information Change - provide only one game (7s or 7h) (use eye	t full name; do not omit modify, or abbreviate any part of th	e Debtor's name)
7. OF IANGED ON ADDED INFORMATION, Complete for Assignment of Ta. ORGANIZATION'S NAME	Party Milotaration Change - provide only one harrie (75 or 75) (use exact	z, rui name, do not omit, modify, or abbreviate any part of the	e Debtor's name,
\ \	\ \		
OR 7b. INDIVIDUAL'S SURNAME			
INDIVIDUAL'S FIRST PERSONAL NAME			
INDIVIDUALS FIRST FERSONAL NAME	/ /		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)			SUFFIX
INDIVIDUAL S ADDITIONAL NAME(S)INTITIAL(S)			JOHN
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
76. MAILING ADDRESS	CIT	STATE POSTAL CODE	COUNTRY
COLLATERAL CHANGE: Also check one of these four Indicate collateral:	boxes: ADD collateral DELETE collateral	RESTATE covered collateral	ASSIGN collatera
	,		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZ	ZING THIS AMENDMENT: Provide only one name (9a	a or 9b) (name of Assignor, if this is an Assignm	ent)
If this is an Amendment authorized by a DEBTOR, check here	and provide name of authorizing Debtor		
9a. ORGANIZATION'S NAME			<u> </u>
Prime Acceptance Corp.			
9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA: Debtor Name: N	OVOA LAURA	·	
47032756 650100156			

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS 11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a on Amendment form 0763261 B-0510 P-1214 5/7/2010 CC NV Douglas 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item 9 on Amendment form 12a, ORGANIZATION'S NAME Prime Acceptance Corp. OR 12b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 13. Name of DEBTOR on related financing statement (Name of a current Debtor of record required for indexing purposes only in some filing offices - see Instruction item 13): Provide only one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name); see Instructions if name does not fit 13a, ORGANIZATION'S NAME 13b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX NOVOA LAURA 14. ADDITIONAL SPACE FOR ITEM 8 (Collateral): Debtor Name and Address: NOVOA, LAURA - 3518 VISTA GRANDE BL, CARSON CITY, NV 89705 Secured Party Name and Address: Prime Acceptance Corp. - 200 W Jackson Blvd. Suite 720, Chicago, IL 60606 15. This FINANCING STATEMENT AMENDMENT: 17. Description of real estate: covers timber to be cut covers as-extracted collateral is filed as a fixture filing LOT 4. AS SHOWN ON THE PLAT OF HIGHLAND ESTATES UNIT NO 1, FILED IN THE OFFICE OF THE COUNTY RECORDER OF 16. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest): DOUGLAS COUNTY, NEVADA, ON JULY 26, 1977 AS DOCUMENT NO 11379. APN; 1420-07-617-042

Prime Acceptance Corp.

File with: Douglas, NV

650100156

18. MISCELLANEOUS: 47032756-NV-5 10656 - PCS Receivables Corp