	DOUGLAS COUNTY, NV Rec:\$60.00 \$60.00 Pgs=1 01/31/2018 08:09 AM
	\$60.00 Pgs=1 U1/31/2018 U8:U9 AM CORPORATION SERVICE COMPANY (UCC)
UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS	KAREN ELLISON, RECORDER
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-858-5294	
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com C. SEND ACKNOWLEDGMENT TO: (Name and Address)	\ \
1419 65297	\ \
Prepared By: Corporation Service Company 801 Adlai Stevenson Drive	
Springfield, IL 62703-4261 Filed In: Nevada (Douglas)	THE ADOLE OR AS IN SOCIETY WAS AND A
1a. INITIAL FINANCING STATEMENT FILE NUMBER	
0442995 6/29/1998	(or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13
TERMINATION: Effectiveness of the Financing Statement identified above is terminated with Statement	respect to the security interest(s) of Secured Party authorizing this Termination
3. ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of A For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8	ssignee in item 7c <u>and</u> name of Assignor in item 9
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law	
5. PARTY INFORMATION CHANGE: Chack one of those two boxes: AND Check one of those three boxes	s to:
Check one of these two boxes: This Change affects Debtor or Secured Party of record CHANGE name and/or add item 6a or 6b; and item 7a	ress: CompleteADD name: Complete itemDELETE name: Give record name
6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only on	name (6a or 6b)
6a. ORGANIZATION'S NAMELampe Corners, Ltd.	
OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL	NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX
 CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment or Party Information Change - provide onleading to the Complete for Assignment - provide onleading to the Complet	one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME	
INDIVIDUAL'S FIRST PERSONAL NAME	
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
7c. MAILING ADDRESS CITY	STATE POSTAL CODE COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxes: ADD collateral	DELETE collateral RESTATE covered collateral ASSIGN collateral
Indicate collateral:	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)	
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor 9a. ORGANIZATION'S NAME Nevada State Bank	
OR 9b. INDIVIDUAL'S SURNAME FIRST PERSONAI	NAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX

10. OPTIONAL FILER REFERENCE DATA:9110 -L Thomas Debtor:Lampe Corners, Ltd.

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