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UCC FINANCING ST	ATEMENT AMEND	MENT	LIEN SOLUTION	Pgs=2	08/13/2018	917996 10:41 AM
A. NAME & PHONE OF CONTAC Phone: (800) 331-3282 F						
B. E-MAIL CONTACT AT FILER OF CLS-CTLS_Glendale_Cu C. SEND ACKNOWLEDGMENT  Lien Solutions P.O. Box 29071 Glendale, CA 91209-	wer.com 85 - US Bank - SBA 66049685 NVNV FIXTURE					
	with: Douglas, NV		THE ABOVE SPA			
1a. INITIAL FINANCING STATEMEN 0729944 B-0908 P-2801			This FINANCING STATE (or recorded) in the REAI Filer: <u>attach</u> Amendment Add	L ESTATE RECOF	RDS	- N.
TERMINATION: Effectiveness     Statement	of the Financing Statement identif	fied above is terminated with respond	ect to the security interest(s	) of Secured Party	authorizing this Terr	nination
	Provide name of Assignee in item ete items 7 and 9 <u>and</u> also indicate		e in item 7c <u>and</u> name of A	ssignor in item 9		
CONTINUATION: Effectiveness continued for the additional per	ss of the Financing Statement iden	tified above with respect to the se	curity interest(s) of Secured	Party authorizing	this Continuation Sta	atement is
5. PARTY INFORMATION CHAI Check one of these two boxes: This Change affects Debtor or 6. CURRENT RECORD INFORMATI 6a. ORGANIZATION'S NAME Incline Village Athletic	AND Secured Party of record ON: Complete for Party Informatio	Check one of these three boxes to: CHANGE name and/or address item 8a or 6b; and item 7a or 7 n Change - provide only one name	o <u>and</u> item 7c 7a or 7b,	ne: Complete item <u>and</u> item 7c	DELETE name: ( to be deleted in ite	Sive record name em 6a or 6b
OR 6b. INDIVIDUAL'S SURNAME	1/	FIRST PERSONAL NAM	1E	ADDITIONAL NAM	E(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMA  7a. ORGANIZATION'S NAME  OR  7b. INDIVIDUAL'S SURNAME		Information Change - provide only <u>one</u> nar	ne (7a or 7b) (use exact, full name;	do not omit, modify, or	abbreviate any part of the l	Debtor's name)
INDIVIDUAL'S FIRST PERSONA  INDIVIDUAL'S ADDITIONAL NAI			/			SUFFIX
7c. MAILING ADDRESS		CITY		STATE POSTA	L CODE	COUNTRY
8. COLLATERAL CHANGE: 4	<u>Also</u> check <u>one</u> of these four boxe	s: ADD collateral D	ELETE collateral	RESTATE covered	collateral A	SSIGN collateral
9. NAME OF SECURED PARTY If this is an Amendment authorized		THIS AMENDMENT: Provide on provide name of authorizing Del	<del></del>	ame of Assignor, if	this is an Assignmer	
9a. ORGANIZATION'S NAME US Bank, N.A.						
OR 9b. INDIVIDUAL'S SURNAME		FIRST PERSONAL NAM	1E	ADDITIONAL NAM	E(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE 66049685	DATA: Debtor Name: Incline 3000003512	e Village Athletic Club, Inc.		Incline	· Village Athletic	Club, Inc.

	NITIAL FINANCING STATEMENT FILE NUMBER: Same as item 9944 B-0908 P-2801 9/12/2008 CC NV Dougl:				
12. N	NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as 12a. ORGANIZATION'S NAME US Bank, N.A.	item 9 on Amendment form		\\	
OR •	12b. INDIVIDUAL'S SURNAME		_	\\	
ŀ	FIRST PERSONAL NAME				
	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		SPACE IS FOR FILING OFFICE US	
2	Name of DEBTOR on related financing statement (Name of a curro one Debtor name (13a or 13b) (use exact, full name; do not omit, 13a. ORGANIZATION'S NAME				13): Provide only
or -	Incline Village Athletic Club, Inc.  13b. INDIVIDUAL'S SURNAME	TEIDST DEDSONAL NAME		ADDITIONAL NAME/SVINITIAL/SV	SUFFIX
	13D. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME		ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
USE	Uned Party Name and Address: Bank, N.A 9918 Hibert Street, 2nd Floor, San Diego This FINANCING STATEMENT AMENDMENT:	17. Description			
, Ке 88	covers timber to be cut covers as-extracted collateral Name and address of a RECORD OWNER of real estate describer if Debtor does not have a record interest):  nneth D. Lommori  S. & 887 Mahogany Drive and not some conditions of the condition o	is filed as a fixture filing to Be fa	axed.		