	Rec:\$60.00 \$60.00 Pgs=2 FIRST CORPORATE S KAREN ELLISON, REC	12/21/2020 0 OLUTIONS INC.	
ANAME & PHONE OF CONTACT AT FILER (optional) ONLINE DEPT 888-507-4593 B. E-MAIL CONTACT AT FILER (optional)  C. SEND ACKNOWLEDGMENT TO: (Name and Address)  FIRST CORPORATE SOLUTIONS INC. 914 S STREET  SACRAMENTO CA 95811 UCC3-400192.1  DOUGLAS COUNTY, NV	FIRST CORPORATE S	OLUTIONS INC.	08:59 AM
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		7	
19 INITIAL CINIANOINO CTATEMENT CILE ALLIMOCO	THE ABOVE SPACE IS FOR		-
2010 020004 (/10/2010	FINANCING STATEMENT AME corded) in the REAL ESTATE R attach Amendment Addendum (For	RECORDS	7%
2. X TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to			
Statement	$\rightarrow$		
<ol> <li>ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8</li> </ol>	item 7c <u>and</u> name of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the securi continued for the additional period provided by applicable law	ity interest(s) of Secured Party	authorizing this Continuation	n Statement is
5. PARTY INFORMATION CHANGE:			
Check one of these two boxes:  AND Check one of these three boxes to:  CHANGE name and/or address: Com  This Charge official District on the company of the	pplete ADD name: Complet	e item DELETE name: C	Sive record name
This Change affects Debtor or Secured Party of record item 6a or 6b; and item 7a or 7b and item 6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a)		to be deleted in ite	all pa or pp
6a. ORGANIZATION'S NAME			
OR 6b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
GUDDATERIC	R		
<ol> <li>CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7         7a. ORGANIZATION'S NAME     </li> </ol>	7a or 7b) (use exact, full name; do not om	it, modify, or abbreviate any part of	the Debtor's name)
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 co	overed collateral A	SSIGN collateral
Indicate collateral:			
\ \ \			
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only or	ne name (9a or 9b) (name of Ass	ignor, if this is an Assignmen	nt)
If this is an Amendment authorized by a DEBTOR, check here and provide name of authorizing Debtor  9a. ORGANIZATION'S NAME			
TECHNOLOGY CREDIT UNION			
9b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME	ADDITION	NAL NAME(S)/INITIAL(S)	SUFFIX
10. OPTIONAL FILER REFERENCE DATA:			

UCC FINANCING STATEMENT AMENDMEI	NT ADDENDUM	^	
11. INITIAL FINANCING STATEMENT FILE NUMBER: Same as item 1a or 2019-930094 6/10/2019	n Amendment form		
12. NAME OF PARTY AUTHORIZING THIS AMENDMENT: Same as item	9 on Amendment form	\ \	
12a. ORGANIZATION'S NAME	o on Amondment term	\ \	
		\ \	
		\ \	
TECHNOLOGY CREDIT UNION		~	
OR 12b. INDIVIDUAL'S SURNAME			
FIRST PERSONAL NAME			
	augen.		le.
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX		<b>N</b>
		THE ABOVE SPACE IS FOR FILING OFFICE US	
<ol> <li>Name of DEBTOR on related financing statement (Name of a current D one Debtor name (13a or 13b) (use exact, full name; do not omit, modify, or ab</li> </ol>			: Provide only
13a. ORGANIZATION'S NAME	_/_/		<del>\</del>
		\ \	
OR 13b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
GUDDAT	ERIC	/ /	
14. ADDITIONAL SPACE FOR ITEM 8 (Collateral):	1	/ /	
15. This FINANCING STATEMENT AMENDMENT:	17. Descriptio	on of real estate:	
covers timber to be cut covers as-extracted collateral is filed. Name and address of a RECORD OWNER of real estate described in item 17 (if Debtor does not have a record interest):	d as a fixture filing		

18. MISCELLANEOUS: