



## UCC FINANCING STATEMENT AMENDMENT

**FOLLOW INSTRUCTIONS** 

TOELOW INSTRUCTIONS					
A. NAME & PHONE OF CONTACT AT FILER (optional) Corporation Service Company 1-800-85					
B. E-MAIL CONTACT AT FILER (optional) SPRFiling@cscinfo.com					
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
92362461 - 336190					
Corporation Service Company	•				
801 Adlai Stevenson Drive Springfield, IL 62703	Filed In: Alabama				
Opinightia, iE 02100	(Shelby)				
		<b></b>		R FILING OFFICE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20070510000219840 05/10/2007		1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13			
2. TERMINATION: Effectiveness of the Financing Statement is	dentified above is terminated	with respect to the security in	nterest(s) of Sec	cured Party authoriz	zing this Termination
ASSIGNMENT (full or partial): Provide name of Assignee is     For partial assignment, complete items 7 and 9 and also indice.			me of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement continued for the additional period provided by applicable law		t to the security interest(s) of	Secured Party	authorizing this Co	ntinuation Statement is
5. PARTY INFORMATION CHANGE:			<u>-</u>		
Check <u>one</u> of these two boxes:  This Change affects Debtor <u>or</u> Secured Party of record	ND Check one of these three to CHANGE name and/or	oxes to: address: CompleteADD 7a or 7b <u>and</u> item 7c7a o	name: Comple	te itemDELETE	name: Give record name leted in item 6a or 6b
6. CURRENT RECORD INFORMATION: Complete for Party Info		<del></del>	or 70, <u>and</u> nem 70	: [] to be de	leted in item ba or bo
6a. ORGANIZATION'S NAMEK and H HELENA, LLC					
6b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITI/	AL(S) SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment 7a. ORGANIZATION'S NAME	t or Party Information Change - provide	only <u>one</u> name (7a or 7b) (use exact,	full name; do not on	nit, modify, or abbreviate	any part of the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME			<u> </u>		
INDIVIDUAL'S FIRST PERSONAL NAME			·		
INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)				<del></del>	SUFFIX
7c. MAILING ADDRESS	CITY		STATE	POSTAL CODE	COUNTRY
8. COLLATERAL CHANGE: Also check one of these four boxe	es: ADD collateral	DELETE collateral	RESTATE C	overed collateral	ASSIGN collateral
Indicate collateral:					
				•	
9. NAME OF SECURED PARTY OF RECORD AUTHORIZED If this is an Amendment authorized by a DEBTOR, check here	ING THIS AMENDMENT: If		9b) (name of Ass	ignor, if this is an As	ssignment)
9a. ORGANIZATION'S NAME CADIM NOTE INC.					· <u>- · · · · · · · · · · · · · · · ·</u>
9b. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITION	IAL NAME(S)/INITIA	L(S) SUFFIX
10. OPTIONAL FILER REFERENCE DATA:401002701/w	d/to Debtorik and L	HEIENIA LIC			
	and Debion. Namid F	I I ILLLINA, LLC			92362461