STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC.

Important: Read Instructions on Back Before Filling out Form.

FORM UCC-3

RECROER FROM

Registre, Inc

SIA PIERCE ST.

P.G. BOX 218

ANOKA, MN. 55303

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n).	No. of Additional Sheets Presented:	This FINANCING STATEMENT is pre- filing pursuant to the Uniform Comm	esented to a Filing Officer for nercial Code
Return copy or recorded original to @CITICORP NATIONAL S formerly known as; CITICORP ACCEPTANCE PO BOX 790142 ST.LOUIS, MO 63179		THIS SPACE FOR USE OF FILING OFFICER Date, Time, Number & Filing Office	
Pre-paid Acct. #			109/20/1993-2899 03:05 PM CERTIFI WHITE COMM. 1993-2899
Social Security/Tax ID #		FILED WITH:	· · · · · · · · · · · · · · · · · · ·
☐ Additional debtors on attached UCC-E			
NAME AND ADDRESS OF SECURED PARTY) (La CITICORP NATIONAL SI formerly known as; CITICORP ACCEPTANCE PO BOX 790142 SELECTIVES IN MO 63179	ERVICES, INC	4. ASSIGNEE OF SECURED PARTY	(#F ANY) (Last Name First if a Person)
☐ Additional secured parties on attached UCC-E			
5. This statement refers to original Financing Statement bearing File No. SHELBY		021758 Date Filed	12-9 88
 8. Partial or The Secured Party's right under to property described in item 11 or to Assignment. 9. Amendment Financing statement bearing file remains and address appears. 	security interest under the financing statement he financing statement bearing fite number s all of the property listed on this fite, is assig	ent bearing the file number shown above. shown above to the pred to the assignee in item 11.	11A. Enter Code(s) From Back of Form That Best Describes The
			Collateral Covered By This Filing: 600 602
Check X if covered: Products of Collateral are at	so covered.	CITICORP NAT	IONAL SERVICES, INC
Signature(s) of Debtor(s) Signature(s) of Debtor(s) (necessary only if item 9 is applicable)		Signature(s) of Secured Party(ies) Signature(s) of Secured Party(ies)	Joll
S.S. term site at managed in the in train a			
Type Name of Individual or Business	OFFICER CORY ACKNOW! EDGEMENT	Type Name of Individual or Busines	SS FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3