STATE OF ALABAMA — UNIFORM COMMERCIAL CODE STATEMENTS OF CONTINUATION, PARTIAL RELEASE, ASSIGNMENT, ETC. — FORM UCC-3

Important: Read Instructions on Back Before Filling out Form.

REORDER FROM

Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(612) 421-1713

☐ The Debtor is a transmitting utility as defined in ALA CODE 7-9-105(n). No. of Additional Sheets Presented:	This FINANCING STATEMENT is presented to a Filing Officer for filing pursuant to the Uniform Commercial Code:
CITICORP NATIONAL SERVICES, INC formerly known as; CITICORP ACCEPTANCE CO, INC PO BOX 790142 ST.LOUIS, MO 63179 Pre-paid Acct #	EN CERT CERT
SAME AS ABOVE	
Social Security/Tax ID #	FILED WITH:
Additional debtors on attached UCC-E NAME AND ADDRESS OF SECURED PARTY) (Last Name First if a Person) CITICORP NATIONAL SERVICES, INC formerly known as; CITICORP ACCEPTANCE CO, INC POBOX 790142	4. ASSIGNEE OF SECURED PARTY (IF ANY) (Last Name First if a Person)
Social Security I Say 1914 0 63179	
☐ Additional secured parties on attached UCC-E	
5. This statement refers to original Financing Statement bearing File No. 025567 Filed with SHELBY COUNTY	MAY 24 90 Date Filed
6. Continuation. The original financing statement between the foregoing Debtor and Sec. 7. XIXexmination. Secured Party no longer claims a security interest under the financing statement bearing file number of the property described in item 11 or to all of the property listed on this file, is whose name and address appears in item 4. 9. Amendment Financing statement bearing file number shown above is amended as a Secured Party releases the collateral described in item 11 from the financing statement shown above.	statement bearing the file number shown above. Inber shown above to the s assigned to the assignee set forth in item 11.
11. 008 523886	11A. Enter Code(s) From Back of Form That Best Describes The Collateral Covered By This Filling: 600 602
Check X if covered: Products of Collateral are also covered.	
	CITICORP NATIONAL SERVVICES, INC
Signature(s) of Debtor(s)	Signature(s) of Secured Party(les)
Signature(s) of Debtor(s) (necessary only if item 9 is applicable)	Signature(s) of Secured Party (es)
Type Name of Individual or Business	Type Name of Individual or Business
(1) FILING OFFICER COPY - ALPHABETICAL (3) FILING OFFICER COPY-ACKNOWLEDGEMENT (4) FILE COPY - SECURED	STANDARD FORM — UNIFORM COMMERCIAL CODE — FORM UCC-3 (5) FILE COPY DEBTOR(S) Approved by The Secretary of State of Alabama