	•		
UCC FINANCING STATEMENT AMENDMEN' FOLLOW INSTRUCTIONS (front and back) CAREFULLY	T		
A. NAME & PHONE OF CONTACT AT FILER [optional]			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	Inst	* 5005-11515	
LexisNexis Document Solutions			
PO Box 2969 Springfield, IL 62708	03/08/20	02-11212	
	09:44 AM	CERTIFIED	
		JUDGE OF PROBATE .00	
	001 CH		
1a. INITIAL FINANCING STATEMENT FILE #	THE ABOVE SPACE	E IS FOR FILING OFFICE USE ON	
1996-41177 12/16/199	6	to be filed [for record] (or recorded REAL ESTATE RECORDS.	
2. X TERMINATION: effectiveness of the Financing Statement Identified above is terminated with respect to security intereset(s) of the Secured Party authorizing this Termination Statement.			
CONTINUATION: Effectiveness of the Financing Statement identified above we continued for the additional period provided by applicable law.	with respect to security interest(s) of the Secured Part	y authorizing this Continuation Statement i	S
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.			
5. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following boxes and provide appropriate information in items 6 and/or 7.			
CHANGE name and/or address: Give current record name in item 6a or 6b; also name (if name change) in item 7a or 7b and/or new address (if address change) in		e ADD name: Complete item 7a or item 7c; also complete items 7d-	7b. and also 7g (if applicable).
6. CURRENT RECORD INFORMATION:	······································		
6a. ORGANIZATION'S NAME			
66. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:	<u></u>		
7a. ORGANIZATION'S NAME			
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7c. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. TAX ID # SSN OR EIN ADD'NL INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated collateral of	description, or describe collateral assigned.		
9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment.			
9a. ORGANIZATION'S NAME	<u> </u>		
Heller Financial, Inc. OR 96. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
10. OPTIONAL FILER REFERENCE DATA AL-Shelby County 0192-0149-001/002			

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 12/16/1996 1996-41177 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME Heller Financial, Inc. MIDDLE NAME, SUFFIX OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME

13. Use this space for additional Information:

DEBTOR NAME

Wen-Alabama, Inc. 400 Century Park South, Suite 214 BIRMINGHAM, AL 35226

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Inst * 2002-11212

03/08/2002-11212 09:44 AM CERTIFIED SHELDY COUNTY JUDGE OF PROBATE

AL-Shelby County