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		A.	
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UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional]	
B. SEND ACKNOWLEDGMENT TO: (Name and Address) LexisNexis Document Solutions PO Box 2969 Springfield, IL 62708	

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	NITIAL FINANCING STATE 98-41469	EMENT FILE # 10/22/199		1b. This	FILING OFFICE USE OF FINANCING STATEMENT A filed [for record] (or recorded L ESTATE RECORDS.	AMENDMENT is
2.		ctiveness of the Financing Statement identified above is te				
3. X	CONTINUATION: E	ffectiveness of the Financing Statement identified above versional period provided by applicable law.	with respect to security interest(s) of the Secured Par	rty authorizing	this Continuation Statemen	t is
4.	•	or partial): Give name of assignee in item 7a or 7b and ac				
6. C	lso check one of the follow	ring boxes and provide appropriate information in items 6 address. Give current record name in item 6a or 6b; also in item 7a or 7b and/or new address (if address change) in FORMATION:	secured Party of record. Check only of and/or 7. give new DELETE name: Give record name to be deleted in item 6a or 6b.		D name: Complete item 7a n 7c; also complete items 7	or 7b. and also d-7g (if applicable).
OR	6b. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
	HANGED (NEW) OR A	ADDED INFORMATION: AME			<u> </u>	
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 DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORG	ANIZATIONAL ID #, if any	NONE
		TERAL CHANGE): check only <u>one</u> box. leted or added, or give entire restated collatera	I description, or describe collateral assigned			

9. N	NAME OF SECURED PARTY OF RECORD AUTHOR adds collateral or adds the authorizing Debtor, or if this is a Term	RIZING THIS AMENDMENT (name of assignor, if this is a nination authorized by a Debtor, check here and enter r	an Assignment). If this is an Amendment autometer of DEBTOR authorizing this Amendment.	thorized by a Debtor which ent.
	9a. ORGANIZATION'S NAME			
	FINOVA Capital Corporation			
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

AL-Sherby County

UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as Item 1a on Amendment form) 1998-41469 10/22/1998 12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME FINOVA Capital Corporation OR 12b. INDIVIDUAL'S LAST NAME MIDDLE NAME, SUFFIX FIRST NAME

20021122000585040 Pg 2/2 28.00 Shelby Cnty Judge of Probate, AL 11/22/2002 13:14:00 FILED/CERTIFIED

13. Use this space for additional information: DEBTOR NAME

RTM Alabama, Inc. 4615 Highway 280 South Birmingham, AL 35242

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