

. INVIVIE & PHUNE OF	NS (front and back) CAREFULLY CONTACT AT FILER [optional]			
SEND ACKNOWLED	OGMENT TO: (Name and Address)			
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INITIAL FINANCING ST	ATEMENT FILE#	THE ABOVE	SPACE IS FOR FILING OFFICE I	
018640			to be filed [for record] (or recorded) in the	
X TERMINATION:	Effectiveness of the Financing Statement identified abo	ove is terminated with respect to security interest(s) of	the Secured Party authorizing this Term	nination Statement.
continued for the add	Effectiveness of the Financing Statement identified ditional period provided by applicable law.	above with respect to security interest(s) of the Secu	ared Party authorizing this Continuation	n Statement is
	ll or partial): Give name of assignee in item 7a or 7b a	and address of assignee in item 7ct and also give no-	e of accionar in Ham O	
		Debtor or Secured Party of record. Check on		
Also check <u>one</u> of the following	lowing three boxes and provide appropriate information	in items 6 and/or 7.	, <u></u> -,	
in regards to changing	raddress: Please refer to the detailed instructions the name/address of a party.	DELETE name: Give record name to be deleted in item 6a or 6b.	ADD name: Complete item 7a also complete items 7e-7g (if ap	or 7b, and also item i
CURRENT RECORD I				
OR OROANIZATIONS				
6b. INDIVIDUAL'S LAS	TNAME	FIRST NAME	MIDDLE NAME	Telleria
F	ERGUSON	RANDALL	A.	SUFFIX
CHANGED (NEW) OR	ADDED INFORMATION:			
7a. ORGANIZATION'S				
7b. INDIVIDUAL'S LAS	TNAME	FIRST NAME	MIDDLE NAME	SUFFIX
MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTR
			f	
SEEINSTRUCTIONS	ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID#, if a	iny
EEINSTRUCTIONS	ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID#, if a	· —
MENDMENT (COLL	ORGANIZATION DEBTOR ATERAL CHANGE): check only one box.			· —
MENDMENT (COLL	ORGANIZATION DEBTOR			· —
MENDMENT (COLL escribe collateral de	ORGANIZATION DEBTOR ATERAL CHANGE): check only one box. eleted or added, or give entire restated collars authorizing Debtor, or if this is a Termination authorizing NAME	ateral description, or describe collateral assigned assignment and assignment and assignment and assignment and a petition, check here and enter name of Different and ent	ed.	
AME OF SECURED dds collateral or adds the 9a. ORGANIZATION'S N	ORGANIZATION DEBTOR ATERAL CHANGE): check only one box. eleted or added, or give entire restated collar PARTY OF RECORD AUTHORIZING THIS A authorizing Debtor, or if this is a Termination authorizing Debtor. PARTY OF RECORD AUTHORIZING THIS A authorizing Debtor, or if this is a Termination authorizing Debtor. PARTY OF RECORD AUTHORIZING THIS A authorizing Debtor.	ateral description, or describe collateral assigned assignment assignment of assignment of the second assignment of the s	ed.	

FOLLOW INSTRUCTIONS (front and back) 11. INITIAL FINANCING STATEMENT FINANCING STATEME	k) CAREFULLY	
12. NAME OF PARTY AUTHORIZING TO 12a. ORGANIZATION'S NAME SECURITY PACIFIC HOUSE 12b. INDIVIDUAL'S LAST NAME		
13. Use this space for additional information DEBTOR NAME RANDALL A. FERGUSON DENNY'S MHP LOT 149 ALABASTER, AL 35007 USA	ion	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

AL-Shelby County

NAME OF AUTHORIZING PARTY SECURITY PACIFIC HOUSING SERVICES INC c/o GREENPOIN 12250 KIRKHAM ROAD POWAY, CA 92064 USA