NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 07/29/98)

IMPORTANT — READ INSTRUCTIONS ON BACK BEFORE FILLING OUT FORM — DO NOT DETACH STUB

		20030310000144020 Pg 1/1 .00 Shelby Cnty Judge of Probate, AL	
		03/10/2003 12:23:00	FILED/CERTIFIE
CC FINANCING STATEMENT AMEND	MENT		
LOW INSTRUCTIONS (front and back) CAREFULLY NAME & PHONE OF CONTACT AT FILER [optional]			
SEND ACKNOWLEDGMENT TO: (Name and Address)			
Magasa			
NITIAL FINANCING STATEMENT FILE #	THE AB	1b. This FINANCING STATE	
2002	-06949	1b. This FINANCING STATE to be filed [for record] (continued and the second areas are second). REAL ESTATE RECORD	or recorded) in the DS.
TERMINATION: Effectiveness of the Financing Statement identified			
CONTINUATION: Effectiveness of the Financing Statement iden continued for the additional period provided by applicable law.	tiffed above with respect to security interest(s) of the	Secured Party authorizing this Continua	tion Statement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a of	or 7b and address of assignee in item 7c; and also give	name of assignor in item 9.	
MENDMENT (PARTY INFORMATION): This Amendment affect		ck only <u>one</u> of these two boxes.	
Iso check <u>one</u> of the following three boxes <u>and</u> provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three sources and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes and provide appropriate informations of the following three boxes are appropriate informations of the following three boxes are appropriate appropriate informations of the following three boxes are appropriate appropriate appropriate and the following three boxes are appropriate appropr	or 6b; also give new DELETE name: Give re		item 7a or 7b, and als
name (if name change) in item 7a or 7b and/or new address (if address URRENT RECORD INFORMATION:	ss change) in item 7c to be deleted in item 6a	or 6b. <u>item 7c; also complete</u>	items 7d-7g (if applica
6a. ORGANIZATION'S NAME			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Walden	John		
HANGED (NEW) OR ADDED INFORMATION: 7a. ORGANIZATION'S NAME			
7 G. ORGANIZATION STRAINE			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
AILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
1233 TRIBE TOAI	AIASASHS	STATE POSTAL CODE	COUNTRY
TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZA ORGANIZATION	· 	7g. ORGANIZATIONAL ID #,	if any
DEBTOR			
MENDMENT (COLLATERAL CHANGE): check only <u>one</u> box. escribe collateral deleted or added, or give entire restate	d colleteral description, or describe colleteral [7].		
rscribe conateraldeleted ofadded, or give entirenestate	d conateral description, or describe conaterala	issignea.	
IAME OF SECURED PARTY OF RECORD ALITHORIZING T	HIS AMENIDMENT (name of assignor, if this is an	Accianment) If this is an Amendment auth	orized by a Debter wh
IAME OF SECURED PARTY OF RECORD AUTHORIZING Ted and a decided of adds the authorizing Debtor, or if this is a Termination and a second action and a second action and a second action and a second action.			
9a. ORGANIZATION'S NAME ALAGASCO C	REDIT & COLLECTIONS		
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
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