



UC	C FINANCING	STATEMENT AMENDMEN	1T				
	ليستاسي والوالوا ويتماسا سالسا	S (front and back) CAREFULLY CONTACT AT FILER [optional]					
ł							
В.	SEND ACKNOWLED	Cue 205-868-4839 SMENT TO: (Name and Address)					
	First	Commercial Bank					
	800 Sh	ades Creek Parkway					
1	Birmin	gham ,A1 35209					
1							
1	ļ						
L			THE ABOVE SP	ACE IS	FOR FILING OFFICE USE	E ONLY	
1a. INITIAL FINANCING STATEMENT FILE #					This FINANCING STATEMEN		
	1999-13596				to be filed [for record] (or reco REAL ESTATE RECORDS.		
2.	X TERMINATION: Ef	fectiveness of the Financing Statement identified above	is terminated with respect to security interest(s) of the	Secured	Party authorizing this Terminal	tion Statem	nent.
3.	•	Effectiveness of the Financing Statement identified ab- tional period provided by applicable law.	ove with respect to security interest(s) of the Secure	d Party a	uthorizing this Continuation St	tatement is	;
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 o	f assigno	r in item 9.		
		/ INFORMATION): This Amendment affects Do		ne of the	ese two boxes.		
, -		wing three boxes <u>and</u> provide appropriate information in		- ¬ ∧	DD name: Camplete Ham 7a a	e7h andal	laa.
CHANGE name and/or address: Please refer to the detailed instructions in regards to changing the name/address of a party.			DELETE name: Give record name to be deleted in item 6a or 6b.	ite	DD name: Complete item 7a o em 7c; also complete items 7e-	7p, and al 7g (if applic	cable).
6. (CURRENT RECORD IN						
OR	6b. INDIVIDUAL'S LAST NAME Gandy		FIRST NAME		MIDDLE NAME		FIX
			Billv.	-	Gene		
7. (DDED INFORMATION:				<u> </u>	
	7a. ORGANIZATION'S N	AME					
OR	Th. INDUSTRALIC LACT	· · · · · · · · · · · · · · · · · · ·			TANDOLGAIAAG		
	7b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		FIX
7c.	7c. MAILING ADDRESS		CITY		TE POSTAL CODE	COUNTRY	
							4 , (4)
7d.	SEE INSTRUCTIONS	ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. C	RGANIZATIONAL ID #, if any		
		ORGANIZATION DEBTOR		}		ì	NONE
8. /	MENDMENT (COLLA	TERAL CHANGE): check only one box.					FIVORE
	•	leted or added, or give entire restated collate	ral description, or describe collateral assigned.				
							
	Terminat	ion: 1999-13596					
a k	AMFORSECURED	PARTY OF RECORD AUTHORIZING THIS AME	ENDMENT (name of against it this is an Amelianus)	ne) 18 25.	e je an Amandua - 12 - 12 - 12 - 1	hara Tanbar	ار المساور و الم
		authorizing Debtor, or if this is a Termination authorized				ny a Depto	4 WINCH
ļ	9a. ORGANIZATION'S N	AME	<u> </u>				
OB	First Comm	ercial_Bank					
UR I	9b. INDIVIDUAL'S LAST	NAME	FIRST NAME	MIDD	LE NAME	SUFF	iX
ne l	9a. ORGANIZATION'S N	AME nercial_Bank_					
}	SD. MEDITIDOAL S LAST	1 47 3141E-		IVIIDD	LE INVIAIE	SUFF	I A

REORDER FROM

Registré, Inc.
514 PIERCE ST.
P.O. BOX 218
ANOKA, MN. 55303
(763) 421-1713

10. OPTIONAL FILER REFERENCE DATA

Billy Gene Gandy