

UCC FINANCING STATEMENT AMENDMENT

	CONTACT AT FILER [optional]				
3. SEND ACKNOWLED	GMENT TO: (Name and Address)				
	on Service Company	BWE			
Sacrament	way Oaks Drive A 95833 A 958				
INITIAL FINANCING STATEMENT FILE # 20727 Date: 07/22/1988 B: P:		THE AB	1b. This FINANCING STATEME to be filed [for record] (or record). REAL ESTATE RECORDS.	NT AMENDMENT is corded) in the	
X TERMINATION: E	Effectiveness of the Financing Statement identified	above is terminated with respect to security interes			
CONTINUATION: continued for the add	Effectiveness of the Financing Statement identificational period provided by applicable law.	ified above with respect to security interest(s) of th	e Secured Party authorizing this Continuation	Statement is	
ASSIGNMENT (ful	l or partial): Give name of assignee in item 7a or	7b and address of assignee in item 7c; and also give	e name of assignor in item 9.		
	Y INFORMATION): This Amendment affects		eck only <u>one</u> of these two boxes.		
CHANGE name and/or	owing three boxes <u>and</u> provide appropriate inform raddress: Please refer to the detailed instructions	DELETE name: Give record name	ADD name: Complete item 7a or	7b, and also item 7c;	
in regards to changing CURRENT RECORD II	the name/address of a party. VFORMATION:	to be deleted in item 6a or 6b.	also complete items 7e-7g (if app	olicable).	
6a. ORGANIZATION'S	NAME				
6b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
CHANGED (NEW) OR	ADDED INFORMATION:				
7a. ORGANIZATION'S	NAME			• • • • • • • • • • • • • • • • • • •	
7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
: MAILING ADDRESS		CITY	STATE POSTAL CODE	COUNTRY	
SEEINSTRUCTIONS	ADD'L INFO RE 7e. TYPE OF ORGANIZAT ORGANIZATION DEBTOR	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if ar	7g. ORGANIZATIONAL ID #, if any	
,	ATERAL CHANGE): check only one box.				
Describe collaterald	eleted oradded, or give entirerestated	collateral description, or describe collateral	assigned.		
	e authorizing Debtor, or if this is a Termination au	HIS AMENDMENT (name of assignor, if this is an atthorized by a Debtor, check here and enter nar		ed by a Debtor which	
9a. ORGANIZATION'S	e authorizing Debtor, or if this is a Termination au	thorized by a Debtor, check here and enter nar		ed by a Debtor which	