

20060705000319960 1/1 \$28.00
Shelby Cnty Judge of Probate, AL
07/05/2006 12:51:32PM FILED/CERT

UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]	
MIDILDA GREEN	949-470-3960
B. SEND ACKNOWLEDGMENT TO: (Name and Address)	
KC Wilson and Associates Ln72-WACHO5C22	
23232 Peralta Drive Suite #218	
Laguna Hills, CA 92653	

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE # 20051027000559070		10/27/2005		SHELBY CO., AL		1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS. <input checked="" type="checkbox"/>			
2. <input type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.									
3. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.									
4. <input checked="" type="checkbox"/> ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c; and also give name of assignor in item 9.									
5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes. Also check <u>one</u> of the following three boxes and provide appropriate information in items 6 and/or 7. <input type="checkbox"/> CHANGE name and/or address: Give current record name in item 6a or 6b; also give new name (if name change) in item 7a or 7b and/or new address (if address change) in item 7c. <input type="checkbox"/> DELETE name: Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item 7c; also complete items 7d-7g (if applicable).									
6. CURRENT RECORD INFORMATION:									
6a. ORGANIZATION'S NAME									
OR									
6b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX			
7. CHANGED (NEW) OR ADDED INFORMATION:									
7a. ORGANIZATION'S NAME									
WELLS FARGO BANK, N.A., AS TRUSTEE *									
OR									
7b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX			
7c. MAILING ADDRESS		CITY		STATE		POSTAL CODE		COUNTRY	
CMBS DEPARTMENT		MINNEAPOLIS		MN		55414		USA	
1015 10TH AVENUE SE									
7d. TAX ID #, SSN OR EIN		ADD'L INFO RE ORGANIZATION DEBTOR		7e. TYPE OF ORGANIZATION		7f. JURISDICTION OF ORGANIZATION		7g. ORGANIZATIONAL ID #, if any	
								<input type="checkbox"/> NONE	

8. AMENDMENT (COLLATERAL CHANGE): check only one box.

Describe collateral ☐ deleted or ☐ added, or give entire ☐ restated collateral description, or describe collateral ☐ assigned.

* FOR THE REGISTERED HOLDERS OF WACHOVIA BANK COMMERCIAL MORTGAGE TRUST, COMMERCIAL MORTGAGE PASS-THROUGH CERTIFICATES, SERIES 2005-C22

FULL ASSIGNMENT-ASSIGNS ALL COLLATERAL AS DESCRIBED ON ORIGINAL FINANCING STATEMENT.

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here <input type="checkbox"/> and enter name of DEBTOR authorizing this Amendment.							
9a. ORGANIZATION'S NAME							
WACHOVIA BANK NATIONAL ASSOCIATION							
OR							
9b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX	
10. OPTIONAL FILER REFERENCE DATA							
DEBTORS: SCHILLECI WHITE STONE, LLC							