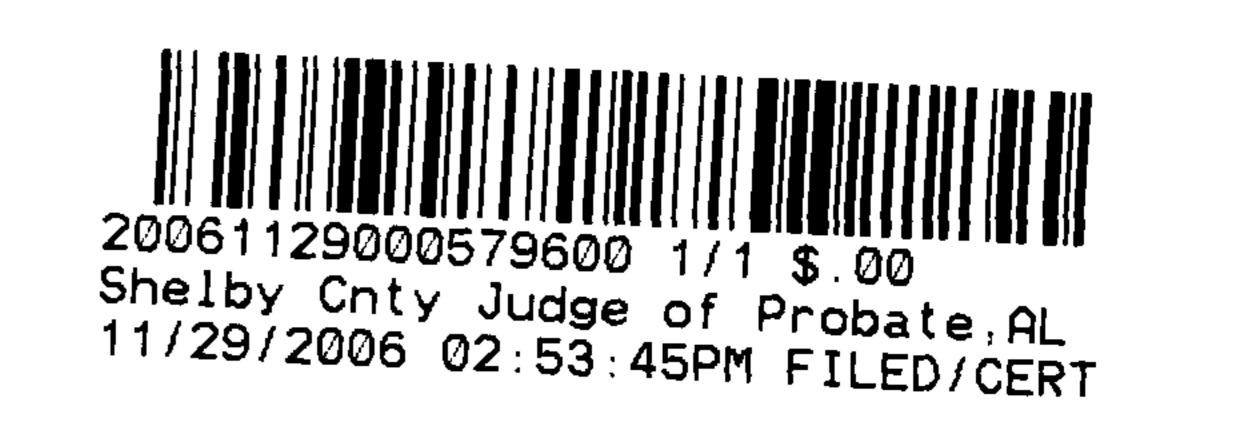
Shelby



UCC FINANCING STATEMENT AMENDME	JT		
FOLLOW INSTRUCTIONS (front and back) CAREFULLY			
A. NAME & PHONE OF CONTACT AT FILER [optional]			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
$\left(\frac{1}{2} \right) = C0$			
Hagasco			
	THE ABOVE	SPACE IS FOR FILING OFFICE USE	ONLY
a. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEMENT	AMENDMENT is
2006/1080005485 TERMINATION: Effectiveness of the Einancing Statement identified above		to be filed [for record] (or record REAL ESTATE RECORDS.	
TERMINATION: Effectiveness of the Financing Statement identified above CONTINUATION: Effectiveness of the Financing Statement identified above			
continued for the additional period provided by applicable law.			
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and			
. AMENDMENT (PARTY INFORMATION): This Amendment affects Down Also check one of the following three boxes and provide appropriate information in	1	ly <u>one</u> of these two boxes.	
CHANGE name and/or address: Give current record name in item 6a or 6b; a name (if name change) in item 7a or 7b and/or new address (if address change)	so give new DELETE name: Give record r		or 7b, and also
CURRENT RECORD INFORMATION:	C) in item 70. Latto be deleted in item 0a of 0b	. Item 70, also complete items 7	u-7g (ii applicabii
6a. ORGANIZATION'S NAME			
6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Cowart	Kimbrough	KiP	
. CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
	<u> </u>		
C. MAILING ADDRESS ROY Drive	Helena	STATE POSTAL CODE 35080	COUNTRY
d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if any	
ORGANIZATION DEBTOR			NON
. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated collate	eral description, or describe collateral assign	ed.	
NAME OF SECULDED DADTY OF DECODE ALITHODIZING THIS AN			
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AN adds collateral or adds the authorizing Debtor, or if this is a Termination authorized	יו⊏ואטועו⊏וע ו (name of assignor, if this is an Assign d by a Debtor, check here	nment). If this is an Amendment authorized bookstall. DEBTOR authorizing this Amendment.	y a Debtor which
9a. ORGANIZATION'S NAME			<u></u>
PR 9b. INDIVIDUAL'S LASTONAME	FIRST NAME	MIDDLE NAME	TOLLECIV
	T TO T TACTIVILE	INITIALE INVINE	SUFFIX
10. OPTIONAL FILER REFERENCE DATA			