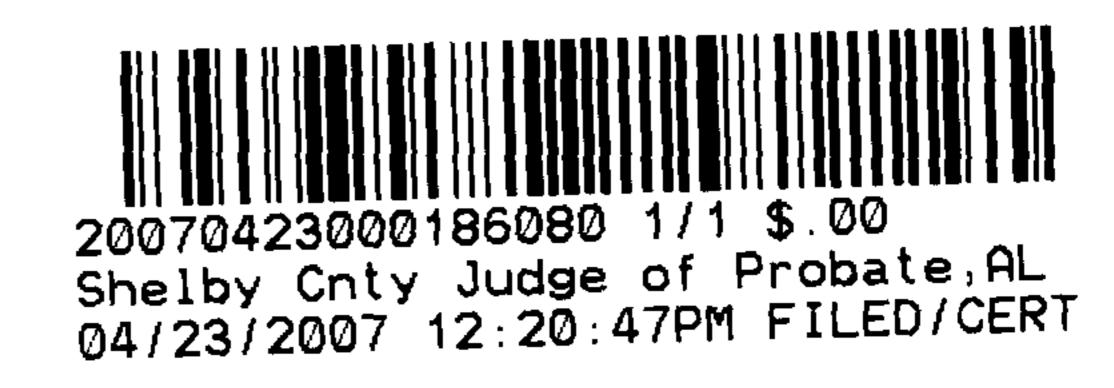
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		·	



LLOW INSTRUCTIONS NAME & PHONE OF CO		ENTAMENDN						
Cheryl M. LaHay		_ ,						
. SEND ACKNOWLEDG								
· · · · · · · · · · · · · · · · · · ·			<del></del>					
WILLIAMS	MULLEN							
222 CENTR	AL PARK	VENUE						
VIRGINIA								
				THE AROVE	SPACE IS FOR FILING OFF	SICE LISE ON! V		
a. INITIAL FINANCING STATEMENT FILE# 20050106000008850 (Shelby County)						ATEMENT AMENDMENT is		
			above is terminated with respect to					
	ffectiveness of the	Financing Statement identif	fied above with respect to security					
			7b and address of assignee in item	<del></del>				
		<ul> <li>I): This Amendment affects</li> <li>d provide appropriate informa</li> </ul>	Debtor or Secured Part	ty of record. Check on	ly <u>one</u> of these two boxes.			
CHANGE name and/orac	ddress: Please refer	to the detailed instructions	DELETE name: Give	e_record name	TT ADD name: Complete it	em 7a or 7b, and also item 7c;		
in regards to changing the CURRENT RECORD INF		party.	to be deleted in item	<u>6a or 6b.</u>	also complete items 7e-	7g (if applicable).		
6a. ORGANIZATION'S NA			· · · · · · · · · · · · · · · · · · ·	······································				
GALLERIA WO	OODS GAR	DENS ASSOCIAT	TES, LLC and BIRMI	NGHAM-RIV	<del></del>			
OD. INDIVIDUAL S LAST	NAME		FIRST NAME		MIDDLE NAME	SUFFIX		
		**************************************		· · · · · · · · · · · · · · · · · · ·		·		
CHANGED (NEW) OR AL		ION:	<del></del>			<del></del>		
ζ								
7b. INDIVIDUAL'S LAST NAME		FIRST NAME	FIRST NAME		SUFFIX			
MAILING ADDRESS			CITY		STATE POSTAL CODE	COUNTRY		
		······································						
d. SEEINSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION		1	7f. JURISDICTION OF ORGANIZATION		7g. ORGANIZATIONAL ID #, if any			
	DEBTOR					NC		
AMENDMENT (COLLA)  Describe collateral		·	collateral description, or describe	collateral assign	ed.			
			•					
NAME OF SECURED I	PARTY OF REC	ORD AUTHORIZING TH	IS AMENDMENT (name of assignment bearing)	gnor, if this is an Assign	nment). If this is an Amendment a	authorized by a Debtor which		
adds collateral or adds the a	authorizing Debtor,	ORD AUTHORIZING TH or if this is a Termination aut	IIS AMENDMENT (name of assignment of assignment)	gnor, if this is an Assign and enter name of D	nment). If this is an Amendment of EBTOR authorizing this Amend	authorized by a Debtor which Iment.		
adds collateral or adds the a	uthorizing Debtor,	or if this is a Termination aut	thorized by a Debtor, check here	and enter name of [	nment). If this is an Amendment and EBTOR authorizing this Amend	authorized by a Debtor which Iment.		
adds collateral or adds the a	uthorizing Debtor, ME CLECTRON	or if this is a Termination aut	IS AMENDMENT (name of assignment of assignme	and enter name of [	DEBTOR authorizing this Amend MIDDLE NAME	ment. SUFFIX		
9a. ORGANIZATION'S NA  MORTGAGE E	AME CLECTRON NAME	or if this is a Termination aut	on Systems, Inc.	and enter name of [	DEBTOR authorizing this Amend	lment.		