

UCC FINANCING STATEMENT AMEND	)MENT	06/12/2007 03:23:07PM FIL	ED/CERT	
FOLLOW INSTRUCTIONS (front and back) CAREFULLY	/FAICIA F			
A. NAME & PHONE OF CONTACT AT FILER [optional]				
B. SEND ACKNOWI EDGMENT TO: (Name and Address)				
B. SEND ACKNOWLEDGMENT TO: (Name and Address)				
PAUL RANEY				
270 TENNYSON DRIVE				
PELHAM AL 35124				
1a. !NITIAL FINANCING STATEMENT FILE #	TH	E ABOVE SPACE IS FOR FILING OFFICE US		
11/8/93 File #1993-35192	BK PG	to be filed [for record] (or rec	to be filed [for record] (or recorded) in the	
2. TERMINATION: Effectiveness of the Financing Statement identifi		REAL ESTATE RECORDS.  Interest(s) of the Secured Party authorizing this Termin	ation Statement	
3. CONTINUATION: Effectiveness of the Financing Statement iden	· · · · · · · · · · · · · · · · · · ·			
continued for the additional period provided by applicable law.				
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a	or 7b and address of assignee in item 7c; and als	so give name of assignor in item 9.		
5. AMENDMENT (PARTY INFORMATION): This Amendment affect	hand hand	Check only one of these two boxes.		
Also check one of the following three boxes and provide appropriate information CHANGE name and/or address: Give current record name in item 6a				
name (if name change) in item 7a or 7b and/or new address (if addre	a or 6b; also give new DELETE name: Coss change) in item 7c. to be deleted in item		7a or 7b, and also s 7d-7g (if applicable)	
6. CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME		· · · · · · · · · · · · · · · · · · ·	· ·	
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
RANEY	PAUL			
7. CHANGED (NEW) OR ADDED INFORMATION:			· · · · · · · · · · · · · · · · · · ·	
7a. ORGANIZATION'S NAME			<u> </u>	
OR 7b. INDIVIDUAL'S LAST NAME	Teleo-Aliane	<del></del>		
TO. INDIVIDUAL S LAST NAIVIE	FIRST NAME	MIDDLE NAME	SUFFIX	
7c. MAILING ADDRESS	CITY	STATE DOCTAL CODE	COLINTERY	
		STATE POSTAL CODE	COUNTRY	
7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	TION 7f. JURISDICTION OF ORGANIZAT	FION 7g. ORGANIZATIONAL ID #, if any		
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			NONE	
Describe collateral deleted or added, or give entire restated	d collateral description, or describe collateral	assigned.		
1987				
WESTFIELD				
GAFLH07A141WF				
NAME OF SECURED PARTY OF RECORD AUTHORIZING TH	HIS AMENDMENT (name of assignor, if this is	an Assignment). If this is an Amandment authorized		
adds collateral or adds the authorizing Debtor, or if this is a Termination a	uthorized by a Debtor, check here and enter	name of DEBTOR authorizing this Amendment.	uy a Deptor Which	
9a. ORGANIZATION'S NAME		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
GREEN TREE SERVICING LLC f/k/a GF	· · · · · · · · · · · · · · · · · · ·			
9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX	
O OPTIONAL BUIED DEFENSE SATA				
10, OPTIONAL FILER REFERENCE DATA  RANEY PAUL	22316478	TAMI LOPEZ - DRR	17/2/8/18	
		MILOILA DAR	104 104/	

FILING OFFICE COPY -- NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)

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