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UCC FINANCING STATEMENT AMENDMENT FOLLOW INSTRUCTIONS (front and back) CAREFULLY A. NAME & PHONE OF CONTACT AT FILER [optional] Phone (800) 331-3282 Fax (818) 662-4141 B. SEND ACKNOWLEDGEMENT TO: (Name and Mailing Address) 8839 CAPMARK FINANCE 13112119 **UCC Direct Services**

P.O. Box 29071 Glendale, CA 91209 1a. INITIAL FINANCING STATEME 1998-21915 06/12/98	NT FILE #	ALAL FIXTURE —	THE ABOV	1b. This	FINANCING STATEMENT of the filed [for record] (or record).	T AMENDMENT is
2. TERMINATION: Effectives	ness of the Financing Statemer	nt identified above is terminated wi	th respect to security interest(s) of t			nination Statement.
3. X CONTINUATION: Effectives continued for the additional period	•	nt identified above with respect to	he security interest(s) of the Secure	ed Party auth	norizing this Continuation S	Statement is
4. ASSIGNMENT (full or partia	I): Give name of assignee i	n item 7a or 7b and address o	f assignee in 7c; and also give	name of a	ssignor in item 9.	·
5. AMENDMENT (PARTY INFORMATION Also check one of the following to CHANGE name and/or address: name (if name change) in item 7.	three boxes and provide a Give current record name in ite	ppropriate information in items em 6a or 6b; also give new	cured Party of record. Check only one of and/or 7. DELETE name: Give record name to be deleted in item 6a or 6b.	ne 🦳 A	two boxes. ADD name: Complete item tem 7c; also complete item	
6. CURRENT RECORD INFORMAT 6a. ORGANIZATION'S NAME ACV PIER BIRMINGHA		nited liability company				
6b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE N	AME	SUFFIX
7. CHANGED (NEW) OR ADDED IN 7a. ORGANIZATION'S NAME OR	VECTOR STATEMENT OF THE					
7b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE N	AME	SUFFIX
7c. MAILING ADDRESS		CITY		STATE	POSTAL CODE	COUNTRY
7d. SEE INSTRUCTION ADD'L INF ORGANIZ DEBTOR		SANIZATION 7f. JURISDICT	ON OF ORGANIZATION	7g. ORGA	NIZATIONAL ID #, if any	NONE
8. AMENDMENT (COLLATERAL C Describe collateral deleted or			or describe collateral assigne	d.		
9. NAME OF SECURED PARTY OF adds collateral or adds the authorizing 9a. ORGANIZATION'S NAME LASALLE NATIONAL BAN	g Debtor, or if this is a Termina					a Debtor which
OR 9b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE N	AME	SUFFIX
10. OPTIONAL FILER REFERENCE		AMTIC a Nevada lim	ited liability company A	98200	5631	1

	AME OF SECURED PARTY OF RECORD AUTHORIZING Adds collateral or adds the authorizing Debtor, or if this is a Term			
	9a. ORGANIZATION'S NAME LASALLE NATIONAL BANK			
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX

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LEGAL DESCRIPTION

Lot D-1, according to the survey of Pier 1 imports Survey, as recorded in Map Book 21, Page 13, in the Dilice of the Judge of Probate of Shelby County, Alabama.

Together with the Perpetual and non-exclusive masement for access on and over the site development; use of parking facilities and through all common areas and private use areas. For purposes of ingress and egress to the adjacent shopping center appurtanant to said tot D-1 in instrument eiggs-14793. Also together with that non-exclusive easement for access as set forth in instrument eiggs-14794.

PROPERTY ADDRESS: 105 INVERNESS CORS, BIRMINGHAM, AL.

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TAX PARCEL ID# 027360001027014

OrderNo: 1