



UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY				
A. NAME & PHONE OF CONTACT AT FILER [optional]				
Kelli Cunningham (405) 236-0003				
B. SEND ACKNOWLEDGEMENT TO: (Name and Address)				
Anderson, McCoy & Orta PC				
100 North Broadway				
Suite 2600				
Oklahoma City, OK 73102				
AMO File No: 1943.032(Orig No. 1943.032)				
AIVIO FILE 140. 1945.052(Origino. 1945.052)				
	THE ABO		OR FILING OFFICE	
1a. INITIAL FINANCING STATEMENT FILE # 20071016000481410 filed 10/16/2007; Shelby Cou	unty, AL	to	is FINANCING STATEME be filed (for record) (or re EAL ESTATE RECORDS	ecorded) in the
2. TERMINATION: Effectiveness of the Financing Statement identified above is ter	rminated with respect to security interest(s) of the			
3. CONTINUATION: Effectiveness of the Financing Statement identified above with continued for the additional period provided by applicable law.	th respect to security interest(s) of the Secured F	Party authorizing th	is Continuation Statement	
4. ASSIGNMENT (ull) or partial): Give name of assignee in item 7a or 7b and address	ess of assignee in item 7c; and also give name o	f assignor in item).	
5. AMENDMENT (PARTY INFORMATION): This amendment affects Debt	tor <u>or</u> Secured Party of Record. Check	only <u>one</u> of those I	ooxes.	
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in items 6 CHANGE name and/or address: Give current record name in item 6A or 6B; also entered the name (if name change) in item 7a or 7b and/or new address (if address change) in	give new DELETE name: Give record	name 3b.	ADD name: Complete item i Item 7c; also complete items	n 7a or 7b, and also s 7d-7g (if applicable).
6. CURRENT RECORD INFORMATION: (DEBTOR)				
6a. ORGANIZATION'S NAME				
LION ES HOTELS HOLDINGS, LP, a Virginia lim		IMIDDLE	NAME	SUFFIX
OR 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	: NAIVIE	301117
7. CHANGED (NEW) OR ADDED INFORMATION:			<u> </u>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
BANK OF AMERICA, N.A., AS TRUSTEE COMMERCIAL MORTGAGE TRUST, COMME	FOR THE REGISTERES	D HOLDE S-THROU	RS OF WAC	HOVIA BANK TES, SERIES
2007-C32				•
OR 7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE	NAME	SUFFIX
	CITY	STATE	POSTAL CODE	COUNTRY
	II -I I Y	ISIVIE	1	
7c. MAILING ADDRESS		lu	160661	IUSA
540 West Madison Street, Mail Code IL 4-540-18-04 7d. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION		IL 7g. OR	60661 SANIZATIONAL ID #, if an	USA
540 West Madison Street, Mail Code IL 4-540-18-04	1 Chicago	IL 7g. OR		
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