

12/28/2009 12:38:25 PM FILED/CERT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY	ENT		
A. NAME & PHONE OF CONTACT AT FILER [optional]			
Corporation Service Company 1-800-858-5294			
B. SEND ACKNOWLEDGMENT TO: (Name and Address)			
47057167			
Corporation Service Company 801 Adlai Stevenson Drive Springfield, IL 62703			
Filed In: Alab	ama Shelby	SPACE IS FOR FILING OFFICE	USE ONLY
a. INITIAL FINANCING STATEMENT FILE # Inst# 2000-17894 5/31/2000		1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.	
2. TERMINATION: Effectiveness of the Financing Statement identified about	ove is terminated with respect to security interest(s) of	· · · · · · · · · · · · · · · · · · ·	
3. CONTINUATION: Effectiveness of the Financing Statement identified	above with respect to security interest(s) of the Sec	ured Party authorizing this Continuation	on Statement is
continued for the additional period provided by applicable law.			
4. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b		·	
La companya di managantan d	Debtor or Secured Party of record. Check or	ly <u>one</u> of these two boxes.	
Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information CHANGE name and/or address: Please refer to the detailed instructions	DELETE name: Give record name	ADD name: Complete item 7a	
in regards to changing the name/address of a party.  5. CURRENT RECORD INFORMATION:	to be deleted in item 6a or 6b.	also complete items 7e-7g (if a	applicable).
6a, ORGANIZATION'S NAME	· · · · · · · · · · · · · · · · · · ·	<del></del>	
AIR ENGINEERS, L.L.C.			
66. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
7. CHANGED (NEW) OR ADDED INFORMATION:		·	······································
7a, ORGANIZATION'S NAME			
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
rc. MAILING ADDRESS	CITY	STATE POSTAL CODE	COUNTRY
7d. SEE INSTRUCTIONS ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	7f. JURISDICTION OF ORGANIZATION	7g. ORGANIZATIONAL ID #, if	any
DEBTOR			NON
8. AMENDMENT (COLLATERAL CHANGE): check only one box.			
Describe collateral deleted or added, or give entire restated coll	lateral description, or describe collateral 🔲 assign	ed.	
NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS adds collateral or adds the authorizing Debtor, or if this is a Termination author			
adds collateral or adds the authorizing Debtor, or if this is a Termination author 9a. ORGANIZATION'S NAME			
<u>, , , , , , , , , , , , , , , , , , , </u>			
adds collateral or adds the authorizing Debtor, or if this is a Termination author 9a. ORGANIZATION'S NAME			