

Shelby Cnty Judge of Probate, AL 08/30/2010 02:52:12 PM FILED/CERT

## UCC FINANCING STATEMENT AMENDMENT

A. NAME & PHONE OF CONTACT AT FILER [optional]

J. Lesinski (727) 777-4000 ext 275

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Nationwide Title Clearing

2100 Alt 19 North

Palm Harbor, FL 34683

1013022153A OWBFA AL Shelby

			SPACE IS FO		
1a. INITIAL FINANCING STATEMENT FILE # Bk: Pg: Instr#: 20060605000263750 Date: 06/05/2006			1b. This FINANCING STATEMENT AMENDMEN to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.		
TERMINATION: E	fectiveness of the Financing Statement identified above	is terminated with respect to security interest(s) o	f the Secured Pa	rty authorizing this Termina	ation Statement.
	Effectiveness of the Financing Statement identified ab tional period provided by applicable law.	ove with respect to security interest(s) of the Sec	cured Party auth	orizing this Continuation S	Statement is
ASSIGNMENT (full	or partial): Give name of assignee in item 7a or 7b and	address of assignee in item 7c; and also give nar	ne of assignor in	item 9.	
AMENDMENT (PART	Y INFORMATION): This Amendment affects D	ebtor or Secured Party of record. Check o	nly <u>one</u> of these	two boxes.	
	wing three boxes <u>and</u> provide appropriate information in				
	address: Please refer to the detailed instructions he name/address of a party.	DELETE name: Give record name to be deleted in item 6a or 6b.		name: Complete item 7a or 7 complete items 7e-7g (if appli	
CURRENT RECORD IN					
6a. ORGANIZATION'S I	NAME				
6b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME		SUFFIX
WOLF		ROB			
	DDED INFORMATION:		<del></del>		
7a. ORGANIZATION'S				<del>,,_ ,, _,_, ,,, , _ , ,, _, ,, _, ,, _, _</del>	
OneWest Bank, F	SB				
7b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
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					l
	<u></u>	CITY	STATE	POSTAL CODE	COUNTR
	REET	CITY PASADENA	STATE	POSTAL CODE 91101	COUNTR
MAILING ADDRESS 888 E. WALNUT STI	ADD'L INFO RE 7e. TYPE OF ORGANIZATION		CA		USA
MAILING ADDRESS 888 E. WALNUT STI SEEINSTRUCTIONS		PASADENA	CA	91101	USA
MAILING ADDRESS 888 E. WALNUT STI SEEINSTRUCTIONS	ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR   ATERAL CHANGE); check only one box.	PASADENA 7f. JURISDICTION OF ORGANIZATION	7g. ORG	91101	<b>.</b>
AILING ADDRESS 388 E. WALNUT STI	ADD'L INFO RE   7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR	PASADENA 7f. JURISDICTION OF ORGANIZATION	7g. ORG	91101	USA
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AAILING ADDRESS 388 E. WALNUT STI SEEINSTRUCTIONS  AMENDMENT (COLL) escribe collateral de	ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR  ATERAL CHANGE): check only one box. eleted or added, or give entire restated collate.	PASADENA 7f. JURISDICTION OF ORGANIZATION  eral description, or describe collateral assignment and assignment a	gnment). If this is	91101 SANIZATIONAL ID #, if any	USA
AAILING ADDRESS BEEINSTRUCTIONS  AMENDMENT (COLL) escribe collateral de	ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR  ATERAL CHANGE): check only one box. eleted or added, or give entire restated collate.	PASADENA 7f. JURISDICTION OF ORGANIZATION  eral description, or describe collateral assignment and assignment a	gnment). If this is	91101 SANIZATIONAL ID #, if any	USA
MAILING ADDRESS 888 E. WALNUT STI	ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR  ATERAL CHANGE): check only one box. eleted or added, or give entire restated collate.	PASADENA  7f. JURISDICTION OF ORGANIZATION  eral description, or describe collateral assignment and assignment and assignment of assignment and enter name of a specific and enter name of a s	gnment). If this is	91101 SANIZATIONAL ID #, if any	USA
MAILING ADDRESS 888 E. WALNUT STI	ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR  ATERAL CHANGE): check only one box.  Pleted or added, or give entire restated collate organization and authorizing Debtor, or if this is a Termination authorized.	PASADENA  7f. JURISDICTION OF ORGANIZATION  eral description, or describe collateral assignment and assignment and assignment of assignment and enter name of a specific and enter name of a s	gnment). If this is	SANIZATIONAL ID #, if any orizing this Amendment.	USA

Loan #: 1013022153A NTCID: 11757039 Entered By: CPE State: AL County: Shelby Debtor: ROB WOLF

## UCC FINANCING STATEMENT AMENDMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form)

Bk: Pa: Instr#: 20060605000263750 Date: 06/05/2006

12. NAME OF PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form)

12a ORGANIZATION'S NAME FEDERAL DEPOSIT INSURANCE CORPORATION as Receiver for La Jolla Bank, La Jolla, CA fka La Jolla Bank, FSB

OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

13. Use this space for additional information

201008300002791/0 2/2 \$29.00 Shelby Cnty Judge of Probate, AL 08/30/2010 02:52:12 PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Additional Debtor JENNIFER WOLF 101 SUPER CENTER DR CALERA, AL 35040