-	
_	
	ننت کی ایک
le)	
	_,
_	
_	
	, ,
	• •
-	
	_

		·								
	CC FINANC				NT					
	NAME & PHONE OF CO			JLL T						
		Phone (800) 331-328	2 Fax (818	8) 662-4141					
B.	SEND ACKNOWLEDGE	MENT TO: (Name an	d Mailing Address)	11573 FALCO	ON FINANCI					
\$	CT Lien So	dutions		255438						
	P.O. Box 2			200100	00404005000329210 1/2 \$.00					
		CA 91209-9071		ALAL		201010050005 Shelby Cnty 10/05/2010 0	Judae of	Propate, me		
	1	J, (0 1200 007 1		FIXTUR	RE ,	1070072310				
						THE AF	SOVE SPACE	IS FOR FILING OFFICE U	ISE ONLY	
L1a.	INITIAL FINANCING	STATEMENT FILE			,		Lan	is FINANCING STATEME	· · · · · · · · · · · · · · · · · · ·	
	2001-02515 01	1/23/01 CC A	L Shelby				X to	be filed [for record] (or record).	orded) in the	
2.	X TERMINATION:	Effectiveness of th	e Financing Statem	ent identified above	e is terminated with	respect to security interest(s)	of the Secure	d Party authorizing this Te	rmination Statement.	
3.	CONTINUATION continued for the ac	 Effectiveness of the dilutional period provide 			e with respect to th	e security interest(s) of the Se	cured Party at	thorizing this Continuation	Statement is	
4.							:		 	
	MENDMENT (PART		 		,	assignee in 7c; and also gured Party of record. Check on				
	Also check one of th		xes and provide	appropriate infor	mation in items	6 and/or 7.			7 7h	
	• •	nge) in item 7a or 7b a			_	DELETE name: Give record to be deleted in item 6a or 6	† !	ADD name: Complete iter item 7c; also complete ite		
6. C	6a. ORGANIZATION'S				······································					
	Automotive Re		L.C.							
OR	6b. INDIVIDUAL'S LAS	TNAME			FIRST NAME		MIDDLE	NAME	SUFFIX	
7. 0	CHANGED (NEW) OF		ATION:	· 						
	7a. ORGANIZATION'S	NAME								
OR	7b. INDIVIDUAL'S LAS	T NAME	.		FIRST NAME		MIDDLE	MIDDLE NAME SUFFIX		
7¢. I	MAILING ADDRESS				CITY		STATE	POSTAL CODE	COUNTRY	
7d. 3	SEE INSTRUCTION	ADD'L INFO RE	T 7e. TYPE OF OR	RGANIZATION	7f. JURISDICTION OF ORGANIZATION		7a ORG	ANIZATIONAL ID #, if any		
		ORGANIZATION DEBTOR					3. 51(5)	NONE		
8. 4	MENDMENT (COLL): check only o <u>n</u>	e box.						
1	Describe collateral	deleted or adde	d, or give entire	restated collate	ral description, o	r describe collateral assi	gned.			
							•			
9. N	IAME of SECURED	PARTY OF RECOR	D AUTHORIZING	3 THIS AMENDI	MENT (name of a	ssignor, if this is an Assignmer	nt). If this is an	Amendment authorized by	v a Debtor which	
	adds collateral or adds to the second	he authorizing Debtor,	or if this is a Termin	ation authorized by	a Debtor, check h	ere and enter name of DE	BTOR author	izing this Amendment.	,	
	FALCON AUTO		OAN TRUST 20	001-1						
OR	9b. INDIVIDUAL'S LAS	T NAME	 :		FIRST NAME		MIDDLE	NAME	SUFFIX	
10	OPTIONAL FILER RI	FERENCE DATA	** *** **		<u></u>		<u> </u>			

25543817 Debtor Name: Automotive Realty Partners, L.L.C. 817008

FO	LLOW INSTRUCTION	S (front and ba	(same as item 1a on Amer	NT ADDENDUM		
	01-02515 01/23/01			TOMENCIONII)		
\$	AME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME FALCON AUTO DEALERSHIP LOAN TRUST 2001-1					
OR 	12b. INDIVIDUAL'S LAST N	AME	FIRST NAME	MIDDLE NAME,SUFFIX		
13.	Use this space for additi	onal information	n			

20101005000329210 2/2 \$.00 Shelby Cnty Judge of Probate, AL 10/05/2010 01:22:48 PM FILED/CERT

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

Description: .