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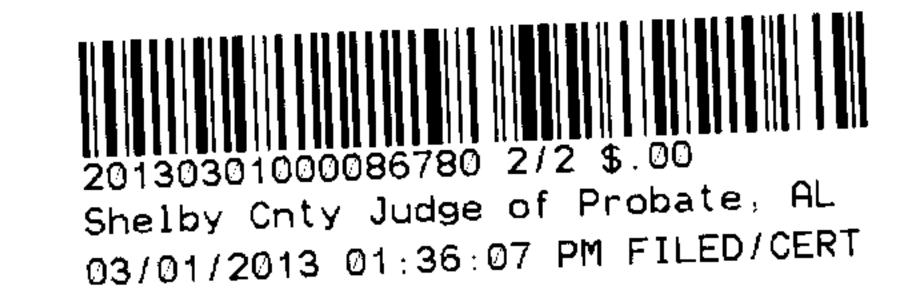
			•		201303010 Shelby Cr	000086780 1/2 \$.0 ity Judge of Prob	0 ate, AL
		MENT AMENDM	ENT		03/01/20	3 01:36:07 PM FI	LED/CERT
NAME & PHONE OF CO	<del> </del>						
	•	-	18) 662-4141				
SEND ACKNOWLEDGEN	MENT TO: (Name and	Mailing Address) 24596 ONE	WEST BANK				
CT Lien Sol	utions	37136	307				
P.O. Box 29	9071						
Glendale, C	A 91209-9071	ALAL					
		FIXTU	RE				
				THE AS	BOVE SPACE IS	FOR FILING OFFICE US	E ONLY
. INITIAL FINANCING 2006060500026					X to be	FINANCING STATEMENT filed [for record] (or record) L ESTATE RECORDS.	
ASSIGNMENT (f AMENDMENT (PART) Also check one of the	Y INFORMATION): e following three box	ame of assignee in item 7a of This Amendment affects [1] of the standard of th	Debtor <u>or</u> Secur Information in items	ed Party of record. Check on 6 and/or 7.	nly <u>one</u> of these	two boxes.	<b>7</b>
		nt record name in item 6a or 6b; a d/or new address (if address chang		DELETE name: Give record to be deleted in item 6a or 6		ADD name: Complete item tem 7c; also complete item	
6a. ORGANIZATION'S							
6b. INDIVIDUAL'S LAST	NAME	,	FIRST NAME		MIDDLE N	AME	SUFFIX
WOLF			ROB				
CHANGED (NEW) OF	R ADDED INFORMA	TION:				·	
7a. ORGANIZATION'S I	NAME						
R 7b. INDIVIDUAL'S LAST NAME		FIRST NAME	FIRST NAME		MIDDLE NAME		
MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY
SEE INSTRUCTION	ADD'L INFO RE	7e. TYPE OF ORGANIZATION	7f. JURISDICTIO	N OF ORGANIZATION	7g. ORGA	NIZATIONAL ID #, if any	
	DEBTOR						NON
8. AMENDMENT (COLL Describe collateral	ATERAL CHANGE	: check only <u>one</u> box. I, or give entire restated coll	lateral description, or	describe collateral assi	igned.		

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here and enter name of DEBTOR authorizing this Amendment						
	9a. ORGANIZATION'S NAME OneWest Bank, FSB					
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX		

10. OPTIONAL FILER REFERENCE DATA

37136307 Debtor Name: WOLF, ROB 101322153 00085-0000002238

FILING OFFICE COPY - NATIONAL UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)



## UCC FINANCING STATEMENT AMENDMENT ADDENDUM FOLLOW INSTRUCTIONS (front and back) CAREFULLY 11. INITIAL FINANCING STATEMENT FILE # (same as item 1a on Amendment form) 20060605000263750 05/02/06 CC AL Shelby 12. NAME of PARTY AUTHORIZING THIS AMENDMENT (same as item 9 on Amendment form) 12a. ORGANIZATION'S NAME ONEWEST Bank, FSB OR 12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

\_\_ Description: N/A

13. Use this space for additional information