CC EINIANICINI	G STATEMENT AMENDMEN					
LLOW INSTRUCTION	S (front and back) CAREFULLY	4 1				
NAME & PHONE OF C	CONTACT AT FILER [optional]					
SEND ACKNOWLEDO	MENT TO: (Name and Address)	·				
•	y, Legal Dept. #11L0009-REO			201303280	000128280 1/1 \$. hty Judge of Pro	00
-	Community Loan Fund, Inc.				13 09:49:59 AM F	
Columbia, l	opin Circle, Suite 500 MD 21044					
Phone: 410						
L			THE ABOVE S		R FILING OFFICE US	
INITIAL FINANCING STA 01202010000725					s FINANCING STATEMEN be filed (for record) (or rec	
01203010000725	4U ffectiveness of the Financing Statement identified above	is terminated with respect to	security interest/s) of th	V RE	AL ESTATE RECORDS.	
	Effectiveness of the Financing Statement identified above	·				
	tional period provided by applicable law.					
ASSIGNMENT (full	or partial): Give name of assignee in item 7a or 7b and	address of assignee in item	7c; and also give name	of assignor in	item 9.	
	Y INFORMATION): This Amendment affects De		of record. Check only	one of these	two boxes.	
	wing three boxes <u>and provide appropriate information in address</u> : Please refer to the detailed instructions	items 6 and/or 7. DELETE name: Give	record name	广 □ ADDr	name: Complete item 7a or 7	7h and also item
in regards to changing t	he name/address of a party.		record manne			
		to be deleted in item (alsoc	omplete items 7e-7g (if appl	icable).
CURRENT RECORD IN 6a. ORGANIZATION'S N		to be deleted in item (alsoc	omplete items 7e-7g (if appl	icable).
6a. ORGANIZATION'S	NAME		Sa or 6b.	alsoc	omplete items 7e-7g (if appl	cable).
6a. ORGANIZATION'S N	WERMENT AND REVITALIZATI		Sa or 6b.	MIDDLE		SUFFIX
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6a. ORGANIZATION'S NALE EMPOY	WERMENT AND REVITALIZATI NAME ADDED INFORMATION:	ON ORGANIZAT	Sa or 6b.			
6a. ORGANIZATION'S N HALE EMPO 6b. INDIVIDUAL'S LAST CHANGED (NEW) OR A 7a. ORGANIZATION'S N	WERMENT AND REVITALIZATI NAME ADDED INFORMATION: NAME	ON ORGANIZAT	Sa or 6b.	MIDDLE	NAME	SUFFIX
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6a. ORGANIZATION'S N HALE EMPON 6b. INDIVIDUAL'S LAST 7a. ORGANIZATION'S N 7b. INDIVIDUAL'S LAST MAILING ADDRESS SEEINSTRUCTIONS	WERMENT AND REVITALIZATION NAME ADDIT INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION	FIRST NAME CITY	CION, INC.	MIDDLE	NAME POSTAL CODE	SUFFIX
HALE EMPONED (NEW) OR A Ta. ORGANIZATION'S NOTES OF THE PROPERTY OF THE PROPER	WERMENT AND REVITALIZATION AND INFORMATION: ADD'L INFO RE ORGANIZATION ORGANIZATION DEBTOR	FIRST NAME CITY 7f. JURISDICTION OF O	CION, INC.	MIDDLE MIDDLE STATE 7g. ORG	NAME POSTAL CODE	SUFFIX
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HALE EMPONED. INDIVIDUAL'S LAST TO TALL ORGANIZATION'S MAILING ADDRESS SEE INSTRUCTIONS AMENDMENT (COLLAD Describe collateral describe d	WERMENT AND REVITALIZATION NAME ADD'L INFORE 7e. TYPE OF ORGANIZATION DEBTOR ATERAL CHANGE): check only one box. Seleted or added, or give entire restated collater.	FIRST NAME FIRST NAME CITY 7f. JURISDICTION OF O	RGANIZATION collateral assigned	MIDDLE STATE 7g. ORG	NAME POSTAL CODE ANIZATIONAL ID #, if any an Amendment authorized	SUFFIX
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HALE EMPONED (NEW) OR A Ta. ORGANIZATION'S NOT TALLING ADDRESS SEEINSTRUCTIONS NAME OF SECURED adds collateral or adds the ga. ORGANIZATION'S NOT TALLING ADDRESS	WERMENT AND REVITALIZATION NAME ADD'L INFO RE 7e. TYPE OF ORGANIZATION ORGANIZATION DEBTOR ATERAL CHANGE): check only one box. Releted or added, or give entire restated collater restated collater restated collater authorizing Debtor, or if this is a Termination authorized rame COMMUNITY LOAN FUND, INC.	FIRST NAME FIRST NAME CITY 7f. JURISDICTION OF O ral description, or describe IENDMENT (name of assign by a Debtor, check here	RGANIZATION collateral assigned	MIDDLE STATE 7g. ORG	NAME POSTAL CODE ANIZATIONAL ID #, if any an Amendment authorized rizing this Amendment.	SUFFIX