UCC FINANCING STATEMENT AMENDN FOLLOW INSTRUCTIONS	MENT				
A. NAME & PHONE OF CONTACT AT FILER (optional) Darcey Bailey (515)362-0873	3				
B. E-MAIL CONTACT AT FILER (optional) bailey.darcey@principal.com			. 4 . 8 . 8 . 1 . 4 . 8 . 8 . 8 . 8	12 0 0 MBL W!(MBL BLI) L 1 5 1 1 1 1 1 1 1 1	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)					
		 201	7031700009	0790 1/1 \$.00	
i e e e e e e e e e e e e e e e e e e e		She 03/	159 Chty J 17/2017 01	ludge of Probate: :03:11 PM FILED/	CERT
		·		R FILING OFFICE USE	
1a. INITIAL FINANCING STATEMENT FILE NUMBER 20061227000627030 12/27/2006		1b. This FINANCING ST (or recorded) in the		ENDMENT IS to be tiled [to RECORDS rm UCC3Ad) <u>and</u> provide Debi	
 TERMINATION: Effectiveness of the Financing Statement identity Statement 	fied above is terminated		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
3. ASSIGNMENT (full or partial): Provide name of Assignee in item For partial assignment, complete items 7 and 9 <u>and</u> also indicate a		-	ame of Assignor	in item 9	
4. CONTINUATION: Effectiveness of the Financing Statement idea			of Secured Party	authorizing this Continuat	ion Statement is
continued for the additional period provided by applicable law 5. PARTY INFORMATION CHANGE:	<u> </u>	·-···			
	heck <u>one</u> of these three t				2 :
This Change affects Debtor of Secured Party of record	CHANGE name and/or item 6a or 6b; <u>and</u> item	7a or 7b <u>and</u> item 7c 7a	D name: Comple or 7b, <u>and</u> item 7		Give record name item 6a or 6b
 CURRENT RECORD INFORMATION: Complete for Party Informat 6a. ORGANIZATION'S NAME 	ion Change - provide only	one name (6a or 6b)			
SCP BUILDING 4 LLC					
66. INDIVIDUAL'S SURNAME	FIRST PERSO	NAL NAME	ADDITIO	NAL NAME(S)/INITIAL(S)	SUFFIX
7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Par 7a. ORGANIZATION'S NAME	rty Information Change - provide	only <u>one</u> name (7a or 7b) (use exac	t, full name; do not or	mit, modify, or abbreviate any part	of the Debtor's name)
OR 7b. INDIVIDUAL'S SURNAME					
75. HADIAIDONE O GORMANIC					
INDIVIDUAL'S FIRST PERSONAL NAME					
INDIVIDUANDO ADDITIONAL NAMEZONINUTIMAZON					SUFFIX
INDIVIDUAL'S ADDITIONAL NAME(\$)/INITIAL(\$)					SOLLIN
7c. MAILING ADDRESS	CITY	, ,, ,, ,, ,, , , , , , , , , , , , , 	STATE	POSTAL CODE	COUNTRY
3. COLLATERAL CHANGE: Also check one of these four boxes:	ADD collateral	DELETE collateral	RESTATE	covered collateral	ASSIGN collateral
Indicate collateral:					
	•				
ACOURED DARRY - RECORD AVELODIZADO	T				
 NAME OF SECURED PARTY OF RECORD AUTHORIZING 1 If this is an Amendment authorized by a DEBTOR, check here and 	THIS AMENDMENT: provide name of authorize	-	(name of As	signor, if this is an Assignm	ent)
9a. ORGANIZATION'S NAME	no for Dan- 04	rno Commonsial M	lortages C	nourities les Com	NA+~*
LaSalle Bank National Association, as Truste	e for Bear Stea			NAL NAME(S)/INITIAL(S)	SUFFIX
AD. HADIVIDUAL & SOMMANIE	I INSTITUTE				
IO. OPTIONAL FILER REFERENCE DATA:			1	<u>-</u>	<u></u>
755530 COUNTY SHELBY CNTY AL	* Pass-throug	h Certs, Series 200	07 TOP 26		