597545 24-JUN-1992 SS RI TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Tell CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of the Secured Party authorizing this Continuation continued for the additional period provided by applicable law. ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in 7c; and also give name of assignor in item 9. AMENDMENT (PARTY INFORMATION): This Amendment affects Debtor or Secured Party of record. Check only one of these two boxes. Also check one of the following three boxes and provide appropriate information in items 6 and/or 7. CHANGE name and/or address: Give current record name in item 8a or 6b; also give new DELETE name: Give record name (T) ADD name: Complete item	ICING STATEMENT AMENDMENT is for record] (or recorded) in the ATE RECORDS. Suthorizing this Termination Statement. It is Continuation Statement is or in item 9.
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MAILING ADDRESS CITY STATE POSTAL CODE	TAL CODE COUNTRY
T- ODCANIZATIONAL ID # foo	ONAL ID # if any
SEE INSTRUCTION ADD'L INFO RE 7e. TYPE OF ORGANIZATION 7f. JURISDICTION OF ORGANIZATION 7g. ORGANIZATIONAL ID #, if any ORGANIZATION DEBTOR 7g. ORGANIZATIONAL ID #, if any ORGANIZATIONAL	NONE NONE
AMENDMENT (COLLATERAL CHANGE): check only o <u>ne</u> box. Describe collateral deleted or added, or give entire restated collateral description, or describe collateral assigned.	