	IG STATEMENT AMEN NS (front and back) CAREFULLY	DMENT				
	CONTACT AT FILER [optional]					
SEND ACKNOWLED	OGMENT TO: (Name and Address)					
Attn Katri PO Box 6	or Credit Company ina B Bobo - MD 610 580020 TN 37068					
			THE ABOVE	E SPACE IS FO	R FILING OFFICE L	JSE ONLY
I, INITIAL FINANCING ST	FATEMENT FILE # # 012162	Filed 07/2		1b. This	FINANCING STATEM e filed [for record] (or re AL ESTATE RECORDS	ENT AMENDMENT ecorded) in the
TERMINATION:	Effectiveness of the Financing Statement ider	ntified above is terminat	ed with respect to security interest(s) of	of the Secured Par	ty authorizing this Term	ination Statement.
CONTINUATION	: Effectiveness of the Financing Statement difficult period provided by applicable law.	identified above with re	spect to security interest(s) of the Se	ecured Party author	orizing this Continuation	n Statement is
	ull or partial): Give name of assignee in item	7a or 7b and address o	f assignee in item 7c; and also give na	ame of assignor in	item 9.	
	RTY INFORMATION): This Amendment a		Secured Party of record. Check of	only <u>one</u> of these t	two boxes.	
0.141.05	llowing three boxes and provide appropriate in l/or address: Give current record name in item	n 6a or 6h: aiso give nev	 DELETE name: Give recon 		DD name: Complete ite m 7c; also complete ite	m 7a or 7b, and also ms 7d-7g (if applica
name (if name chan	ge) in item 7a or 7b and/or new address (if ad INFORMATION:	adress change) in item 7	C. To be deleted in item of or v	VC		
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