LICC FINA	NCING STATE	EMENT AMENDME	NT				
FOLLOW INS	RUCTIONS (front and	back) CAREFULLY	IN I				
A. NAME & PHON	OF CONTACT AT FILER [or	otional] (800) 331-3282 Fax (81	8) 662 4141				
R SEND ACKNON	VLEDGEMENT TO: (Name an		·				
B. SEND ACKNOW	VLEDGEMENT TO. (Name an	d Mailing Address) 13475 SOVE	REIGN BANK				
		444054					
	Direct Services	111251	13				
· ·	Box 29071	RIRI					
Glend	lale, CA 91209-9071	, , , , , , , , , , , , , , , , , , ,					
				THE ABOV	'E SPACE I	S FOR FILING OFFICE USE	ONLY
	NCING STATEMENT FILI 11-AUG-2002 SS F				tot	s FINANCING STATEMENT the filed [for record] (or record AL ESTATE RECORDS.	AMENDMENT is ed) in the
2. TERMINA	ATION: Effectiveness of the	ne Financing Statement identified abov	e is terminated with	respect to security interest(s) of t	he Secured	Party authorizing this Termi	nation Statement.
3. X CONTINUED	JATION: Effectiveness of the or the additional period provide	ne Financing Statement identified aboved by applicable law.	e with respect to the	security interest(s) of the Secure	ed Party au	horizing this Continuation Sta	atement is
4. ASSIGNI	AFNT (full or partial): Give	name of assignee in item 7a or 7b	and address of	seciones in 7c; and also give	name of a	essioner in item 9	
				red Party of record. Check only o			
Also check o	e of the following three bo name and/or address: Give cur	oxes and provide appropriate information rent record name in item 6a or 6b; also	rmation in items 6	and/or 7. DELETE name: Give record name:	ne l	ADD name: Complete item 7	a or 7b, and also
		nd/or new address (if address change)	in item 7c.	to be deleted in item 6a or 6b.		item 7c; also complete items	
6a. ORGANIZA	CORD INFORMATION: TION'S NAME Balty, LLC	·					
np	-		FIRST NAME		MIDDLE NAME		SUFFIX
	EW) OR ADDED INFORM.	ATION:					
7a. ORGANIZA	TION'S NAME						
OR 76. INDIVIDUA	7b. INDIVIDUAL'S LAST NAME		FIRST NAME		MIDDLE NAME		SUFFIX
7c. MAILING ADDR	ESS		CITY		STATE	POSTAL CODE	COUNTRY
7d. SEE INSTRUCT	ION ADD'L INFO RE	7e. TYPE OF ORGANIZATION	7f. JURISDICTION	OF ORGANIZATION	7g. ÖRGA	NIZATIONAL ID #, if any	
	ORGANIZATION DEBTOR						NONE
	(COLLATERAL CHANGE	·	·		/		
Describe collat	eral deleted or adde	ed, or give entire restated collate	ral description, or	describe collateral assigne	d.		
÷							
		•					
		•					
 NAME OF SEC adds collateral of 	URED PARTY OF RECOR	RD AUTHORIZING THIS AMEND! or if this is a Termination authorized by	MENT (name of ass	signor, if this is an Assignment). I are and enter name of DEBT			Debtor which
9a. ORGANIZA	adds the admidizing Deptor.				ביתחתונות אינ		
Carrante	TION'S NAME	o. II and is a Forming allowaged by			OK auingriz		
Sovereign	TION'S NAME Bank	o in this bar formillation authorized by					
OR	TION'S NAME	o mano is a formination additionable as	FIRST NAME		MIDDLE N	AME	SUFFIX

11125113 Debtor Name: Lehigh Realty, LLC 8507 51743404